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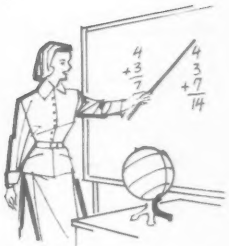

Exceptional Children

ASSUMPTION UNIVERSITY LIBRARY

CEC Dates

Nov. 9-12, 1960	CEC Eastern Fall Regional, Southern Hotel, Baltimore, Maryland
Nov. 16-19, 1960	CEC West Central Fall Regional, The Biltmore Hotel, Oklahoma City
April 4-8, 1961	CEC International Convention, Statler Hotel, Detroit, Michigan
April 24-28, 1962	CEC International Convention, Deshler Hilton Hotel* and Neil House, Columbus, Ohio

*Convention Headquarters

(See page 40 for CEC chapter-federation dates.)

Other Dates

Aug. 28-Sept. 2	8th World Congress, International Society for the Welfare of Cripples, Hotel Waldorf-Astoria, New York, N. Y.
Sept. 4-10	International Society of Orthopedics and Traumatology, New York, N. Y.
Sept. 25-29	National Recreation Congress, Washington, D. C.
Oct. 9-14	American Academy of Ophthalmology and Otolaryngology, Chicago
Oct. 10-12	National Rehabilitation Association, Oklahoma City
Oct. 15-20	American Academy of Pediatrics, Chicago
Oct. 17-21	48th Annual Safety Congress and Exposition, National Safety Council, Chicago
Oct. 31-Nov. 4	American Public Health Association, San Francisco
Nov. 11-19	American Occupational Therapy Association, Los Angeles

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Find table of contents on back cover

The President's Page

Jack Birch, CEC president, is shown at the recent convention of the Pennsylvania Association for Retarded Children, presenting the first "Council for Exceptional Children Award" of the Northwest Pennsylvania Chapter of CEC to Gertrude A. Barber. Dr. Barber is assistant superintendent of schools in Erie, Pa., president of the Pennsylvania Association for Retarded Children, and a member of CEC's Governing Board. Holding the illuminated manuscript is Vincent J. Fitzpatrick, first vice-president of the National Association for Retarded Children.

Dear Colleagues:

I appreciate this opportunity to communicate directly with members of CEC all over the world. Please help me to represent you by writing to me about your attitudes and by informing me about resolutions and other actions of your chapters and federations on issues before the Council. I, in the meantime, will share with you the matters which loom large to me. Some of them are noted below.

Who belongs to the Council for Exceptional Children?

I visited an Ohio chapter whose president was a pediatrician. A director of curriculum is president-elect of another chapter. I have been told of many chapters whose officers and members include parents of exceptional children, social workers, nurses, psychologists, public health workers, presidents of service clubs.

We don't really know enough about our almost 15,000 members. To remedy this situation, we plan a census and poll of the membership during the current year. It will be conducted, probably, by distributing a questionnaire with one of the winter journal issues. Watch for it. And if you have a question which you feel should be asked of all the members, send it to me.

What shall we do about the proposed new constitution?

We all owe a debt of gratitude to William C. Geer and his Committee on Council Reorganization for the days of work they have given to preparing the proposed revision of the CEC constitution. It appears in the May 1960 Journal and it was presented and discussed at the Delegate Assembly.

Articles II and III, Purpose and Membership, take less than 25 lines of print, but they are so fundamental that I'm repeating them here:

ARTICLE II. PURPOSE

The principal purpose of the Council shall be to advance the education of exceptional children and youth.

ARTICLE III. MEMBERSHIP

Section 1. New Enrollments

New membership enrollments in the Council shall be professional personnel from the field of education of exceptional children and youth.

Section 2. Regular Members

A regular member shall be a person enrolled in CEC on a periodic-term basis, except one eligible for student membership.

Section 3. Student Members

A student member shall be a person enrolled in CEC on a periodic-term basis, who is in attendance during the academic year at an accredited college or university, and who is not engaged in full-time employment.

Section 4. Life Members

A life member shall be a person enrolled in CEC on a life-term basis.

Do you want to admit as members only professionals in the field of special education? Or do you want a broader membership principle? Do you want to limit the purpose to advancing the education of exceptional children? Or do you want CEC to embrace a broader purpose?

Please tell Mr. Geer how you feel about these

and other aspects of the constitution. Discuss it in your chapter meetings. Write about it to the international office (1201—16th Street, N.W., Washington 6, D. C.). Instruct your delegates so they will be ready to express your views in Detroit next April.

Can we develop national standards for special educators?

How can CEC contribute to establishing orderly and realistic qualification criteria? Once that is accomplished, how can CEC promote the widest degree of acceptance for professional standards? Preliminary conversations are under way now in a subgroup of the Inter-Agency Committee chaired by Gunnar Dybwad of the National Association for Retarded Children. Discussion is under way also in CEC's Teacher-Education Division. We need the ideas of all members on this subject. Your comments will be welcomed.

Where is the largest untapped reservoir of potential members?

It is my estimate that June Jordan's special study revealed that there are more than 10,000 potential additional CEC members in the 56 largest cities in the United States and Canada. A study session met in Washington to study this problem and to recommend actions. (*See the Bulletin section of this issue for further information.*)

Where are the Divisions heading?

Representatives of CEC's five divisions met together for the first time in Pittsburgh on June 17 and 18 to discuss mutual problems and relationships with the Council. (*See the Bulletin section of this issue for further information.*) Problems of communication had high priority, along with the definition of the role of a division. Sooner or later all members of CEC must help decide what part divisions are to play in the total structure and mission of CEC.

Have a good year!!!

I pray that we will all use our minds and bodies, our skills and strengths, to fulfill our highest ideals in behalf of exceptional children, youth and adults, thus glorifying God in our personal and professional lives.—***Jack W. Birch***

The Administration Year June 1, 1960-May 31, 1961 is probably the last for CEC LIFE MEMBERSHIPS at the old rate of $150

All CEC life membership receipts are deposited in a trust fund—a fund that made considerable growth last fiscal year. Following is a report of its status as of May 31, 1960.

Enrollments prior to June 1, 1959	86
Enrollments June 1, 1959-May 31, 1960	113
Total	199

Number of paid-up life members, May 31, 1959	19
Number who completed payments during 1959-60	9
Number with payments up to date	156
Number with one or more payments in arrears	15
Total	199

The value of 199 life memberships is $29,850. Of this amount the Council had received $9,105 by May 31, with $20,745 outstanding. In addition, the Council had received $162.91 in interest on two government bonds it holds, thereby making the total value of the life membership account, $30,012.91.

How about treating yourself—or a retiring co-worker—to a CEC life membership before June 1, 1961, at the old rate of $150? You would be buying a bargain and would, at the same time, be contributing to the Council's trust fund.

A gift membership is available for cash. A personal purchase of a life membership is available under three options:

A single payment at $150
Two payments at $75 each
Three payments at $50 each

For prompt attention, please address your order to Carol Dralle, assistant director, Membership and Sales, The Council for Exceptional Children, NEA, 1201 Sixteenth St., N.W., Washington 6, D. C.

THE PRESENT STATE OF RESEARCH ON THE ABLE

JOHN CURTIS GOWAN

THIS report is too limited to constitute a status survey of research on gifted children, but is, instead, a series of impressions of the high spots of such a survey. In the first place anyone who looks at the area has initial impressions that research here lacks coordination, that it is fanning out into new areas, that it languishes for lack of direction. The lamentable lag between research and practice, the danger of research leadership outstripping (and therefore losing communication with) educational followers, and the dichotomy between what is known and what is done is everywhere evident.

It is here suggested that perhaps the fault lies not completely with educational practice, but also with those of us who are producing research. *We must restate research for its various audiences,* if we are to remain in rapport between theory and practice. In substance there are *five* specific target groups. Each of these groups needs an explanation in different terms of the implications of research on the gifted. In decreasing order of size, and in increasing order of need for specificity in research results these groups are as follows:

1) the *public*
2) the *teachers*
3) the *administrators*
4) the *specialists*
5) the *researchers*

Leaving out the public which needs broad and frequent statements on the relation of special education of the able to general education, and the researchers who need to have total communication, let us look at research reports for the middle three groups.

Teachers need *knowledgeable applications for instructional use* and *acceptance as typified by attitudinal changes.* By "knowledgeable" is meant applications of research which are more than "cook book," so that a teacher knows *why* to do something as well as *what* to do. The enrichment in depth for gifted children is too big a subject to be more than noted here, and one which incidentally should not be undertaken without the help of curriculum experts (such as the ASCD). The definitive work on elementary curriculum for gifted children has yet to be written, but useful references will be found in bulletins of the ASCD, in curriculum issues of the *Review of Educational Research,* and in subject journals such as *Elementary English, Mathematics Teacher,* and others. Other sources include school districts (Montebello, Cal., 1955), university workshops (Otto, 1955), state departments of education (Castallana, 1958), and the U. S. Office of Education. On the secondary level, recent publications by the NEA Project for the Academically Talented (Bish, 1959, 1960), the Conant report (Conant, 1959), the work done by the Physical Science Study Committee (Little, 1959), and the College Entrance Examination Board Commission of Mathematics (1958), are all noteworthy.

Motivational Stimulation

Difficult as it is to come by good instructional enrichment material, perhaps the greater need for the teacher is the acceptance of attitudinal changes in regard to the gifted, and to the essential nature of teaching relationships with them. While subject competence is highly desirable, the best teacher is not the one who knows the most, but the one who inspires the most. No teacher can be an inexhaustible fount of knowledge for a gifted child, but must learn to stimulate him to find out things for himself and be given the freedom and the (library or research) opportunity to do so. Space is not available to elaborate in detail the nature of these changes, but a single example may be helpful. It is at least possible that television and teaching ma-

• JOHN CURTIS GOWAN is professor of education at the San Fernando Valley State College, Northridge, California. This paper was presented at the April 1960 Los Angeles convention of The Council for Exceptional Children.

chines in the nation's schools will some day open up many new opportunities for learning for gifted as well as for average children. Teachers will still be needed however, and the essential relationship between teacher and learner (which is a motivational stimulation) will not be disturbed. Attitudinal reorientation of teachers, however, will be needed, as it is needed today when teachers who have worked in regular classes take over special classes with the gifted. Inservice training is a partial answer to this problem.

Administrators are primarily concerned with evaluation and comparative studies on the effectiveness of various procedures such as enrichment, grouping and accelerations, and the specifics of identification, costs, budget, staff, and personnel. What researchers need to recognize here is that there is a difference between proving that a certain procedure is more efficient, and gaining administrative acceptance for it. There is ample testimony for example, that both grouping (Shane, 1960; Martinson, 1960) and acceleration (Passow, 1958), (Tyler, 1958) are effective, whereas enrichment (as ordinarily practiced) is not; but up to recently, this has not been popularly accepted. The inadequacy of the IQ as a single measure of identification, and the importance of multidimensional criteria has been noted by numerous investigators, Pegnato and Birch (1959) being a good example. Other reviews of research of interest include those of Fliegler and Bish (1959), Goldberg (1958), Gowan (1958), and Newland (1959).

The specialists in the education of gifted children, (who include directors of programs, consultants, key staff and personnel, psychologists, etc.) are primarily interested in what would be called in other fields *production design.* Here the growing edge of research meets the test of practice by modifications in objectives and procedures. There is space here to comment on only two of these critical areas, those involving creative thrust and achievement mastery in the gifted child.

The whole area of creativity under the excellent leadership of Taylor at Utah (Taylor, 1955, 1957, 1959) and Torrance at Minnesota (Torrance, 1959, 1960) has opened up new vistas and objectives. We have learned that intelligence does not just *grow;* it *develops* (from general to specific areas). Guilford (1959) has shown us the many kinds of *intelligences,* the importance of emphasizing *divergent* as well as convergent thinking in our identification procedures and in our school practices with the able. Getzels and Jackson (1958) and Barron (1958) have pointed out that the essence of creative thinking is divergence from the usual and comfort in the presence of that which is different. Yet our educational system continues to ignore or penalize constructive non-conformity and to reward the passive submission to restraint which Ghiselin has called "education by shrinkage." The ability to identify, recognize, stimulate, and reward the creative child in our schools is a problem with which we must grapple.

Achievement and the Gifted

A concurrent (and in some respects a converse) issue is that of achievement and underachievement in gifted children. There has been a great deal of work done in this area recently. Perhaps the best way to pull the threads of research together is to:

1. Take a number of studies (Barrett, 1958; Bishton, 1955; Bowman, 1959; Broedel and others, 1958; Gough, 1955; Gowan, 1955, 1957; Heath, 1959; Haggard, 1958; McClelland, 1953; Morgan, 1952; Middleton, 1959; Nason, 1958; Strodbeck, 1958; Terman & Oden, 1947);
2. Write each of their results relative to achievers or underachievers on separate slips of paper;
3. Group the papers together like test loadings to form "factors";
4. Inspect the results.

When this is accomplished four groups of "factors of achievement" emerge.

The first group involves background, and includes such factors as (1) parental environment, (2) similarity of values between parents and child, and (3) the involvement of parents in developmental tasks of the child. The next group measures process, including (4) the degree to which satisfactions have shifted from libido to ego controls (For example, achievers project themselves farther into future, can give up immediate pleasure for future gains, have developed sense of responsibility), (5) purpose, motivation and morale, (6) self-confidence, and a positive self-concept, and (7) anti-authoritarian behavior including tolerance

of ambiguity, benign humor, wide interests, intraception and creativity. The group also includes (8) interest-maturity, (9) early set on industry tasks, especially reading, arithmetic, orientation to the use of time and money, and (10) positive personality integration.

The third group includes the adolescent developmental tasks of (11) breakaway from home (12) peer socialization, (13) vocational adjustment and (14) intellectual adjustment, making it apparent that achievement in the able is connected with the on-schedule completion of developmental tasks.

Finally there comes a group of factors indicating cultural pressures, which are apparently part of the price the achiever must pay for integration into the adult world. While not all achievers accept all of these ways of coping with the culture, each achiever apparently strives along that path which seems to produce the best results for him. The factors are (15) independence (achievers)—hostility (underachievers), (16) need for status and approval from adults, (17) power and approval (which seems to be different from the previous), (18) culturally-approved aggression, and (19) cultural conforming adaptation.

Among the many direct implications of these findings for school procedures, one important one is that teachers and others need to take a more active part in shaping both community and educational attitudes toward the achieving youth. As the community value structure towards the education of gifted children in general and towards the encouragement of creativity and achievement in particular becomes more firmly crystallized, and as educators implement and reinforce these attitudes in school. we shall make progress towards the production and conservation of talent, which may well become the paramount issue of the last half of the 20th century.

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(*Continued on page* 17)

PSYCHOLOGICAL PROCEDURES in the DIAGNOSIS of MENTAL RETARDATION

MARJORIE H. RICHEY

DIAGNOSIS of mental retardation is one of the most frequent responsibilities of the clinical psychologist in school and community settings. Statistics from representative child guidance centers in urban areas, for example, indicate that these cases constitute approximately a quarter of referrals (10). Yet in spite of the frequency and significance of such referrals, psychologists are sometimes criticized for superficial, perfunctory work with retarded subjects. One reason may be that the question of what constitutes an adequate evaluation of retardation has received relatively little attention in the literature. To meet a possible need, the following is offered as a guide to psychological procedures in what is usually an inter-professional diagnosis.

Types of Retardation

A fundamental distinction to be made in diagnosis is that between mental retardation, the generic term for slow intellectual development in which there may or may not be potential for later growth, and mental deficiency, which is probably best defined by a multiple criterion such as that of Doll: (Mental deficiency is) ". . . (a) social incompetence, (b) due to mental subnormality, (c) which is developmentally arrested, (d) which obtains at maturity, (e) is of constitutional origin, and (f) is essentially incurable." (6)

• MARJORIE H. RICHEY is in private clinical practice in Muncie, Indiana. Prior to this, Dr. Richey served as an assistant professor of psychology at the University of Kansas from 1953-57 and as a visiting assistant professor at the University of Maryland during 1957-58.

Deficiency may be further classified as "endogenous" or "exogenous." Endogenous cases are those in which the etiology is believed to be hereditary. Included in this classification are amaurotic family idiocy, phenylpyruvic oligophrenia, and Schilder's disease. "Garden variety" or "sub-cultural" retardation, which is popularly called "familial," is also generally classified in this group, although as Sarason has said, "Until the relation between the behavior and the cultural setting of the garden-variety defective is more intensively studied from a psycho-anthropological point of view, dogmatic statements about the etiology of garden-variety deficiency are not warranted." (15)

Exogenous deficiencies are those which are secondary, acquired, or environmental, arising from impairment to the brain before, during, or after birth, as a result of injury or infection. Examples include cases with cerebral palsy, cretinism, and mongolism.

A third general category is the "pseudo-defective," *i.e.*, apparent deficiency arising from psychological causes. This group comprises some childhood schizophrenias, cases of retardation due to emotional deprivation in infancy, and other children whose symptoms feign deficiency.

Test Motivation of Retarded Subjects

To a greater extent than is true with normal subjects, it is necessary for the examiner to structure a situation in which the retarded child can give an optimal test performance. Because the subjects fre-

Table 1. INTELLIGENCE TESTS WHICH CIRCUMVENT HANDICAPS

Test and Publisher	Age Range	Comment	Handicap for which Test is Useful				
			Motor	Speech	Foreign Language or Deafness	Blindness	Educational Lack
WISC Verbal Scale Psychological Corp.	5-15 yrs	No motor manipulation. Written problems would be read to blind S's.	X			X	
WISC Performance Scale Psychological Corp.	5-15 yrs	Little or no speech required of S.		X			X
Arthur Performance Scale Psychological Corp.	4.5 superior adult	No speech required of S. Directions can be pantomimed. Timed performance items.		X	X		X
Hayes-Binet Houghton-Mifflin (special materials: Perkins Inst. Watertown 72, Mass.)	3-superior adult	Special adaptation of Stanford-Binet for the blind				X	
Full-Range Picture Vocabulary Southern Universities Press	2 yrs and over	No speech required of S, but scores highly correlated with vocabulary tests. Untimed.	X	X			

quently do not understand implications of the examination, motivation is likely to be erratic.

The examiner will do well, with most retarded subjects, to use a plain, virtually empty room containing no play materials, supply cupboards, or other distracting features. It is often desirable to start the examination at a level of difficulty nearer the upper limits of ability than one does with the average child. For differential diagnosis as well as for educational planning, it is frequently more important to know the maximum levels of which a child is capable than to have an exact basal. Since motivation may diminish, the most essential parts of the examination should be administered while one still has the child's best cooperation.

Since retarded cases are usually brought to the psychologist for diagnostic purposes only or primarily, some of the procedures and restrictions followed with pre-therapy clients may be modified in the interest of good rapport and motivation. For example, it is probably best not to introduce the child to the clinic through a period of free play in an attractive play room. Such an introduction may make it difficult for a child to shift to the more prosaic test materials when the actual testing is begun. On the other hand, it is permissible to commit one's self in a more personal way in expressions of encouragement and acceptance than might be done with a pre-therapy client. A retarded youngster may be complimented on his behavior, thanked for his "help," or given a reward such as candy for his efforts.

It is not always desirable to exclude the parent from the testing room. Sometimes she can help to elicit the child's best effort, and she will often know whether failure on an item is due to a real inability to perform it. It is best to have her seated out of the child's direct line of vision, and to explain to her in advance that examination questions may not be re-worded or supplemented.

Selection of Intelligence Tests

In addition to eliciting the child's optimal efforts, the examiner has a responsibility to select test materials which will tap an appropriate variety of performances, since a selective handicap may obscure latent abilities in other areas. The battery should be selected to take into account any sensory, motor, verbal, educational, or cultural handicap of the child. It is possible with the presently available selection to administer some appropriate test to a subject with almost any handicap or combination of handicaps. There are tests which can be admin-

istered without language and to which a child can respond simply by pointing. On Table 1 are listed examples of tests of general intelligence which are used at various age levels for children with various types of handicaps.

Over and above specific tests chosen for special purposes, it is desirable to administer one non-language test to every suspected retardate, since verbal tests may penalize anxious and culturally-deprived children as well as some brain-injured cases. Such tests are also helpful in cases in which undetected partial deafness may have been mistaken for deficiency (7). Because of their superior standardization, it is desirable to administer the Stanford-Binet or the WISC in addition to any other tests used. As an aid to differential diagnosis, attempts have been made with both tests to identify subtest patterns characteristic of different defective groups. In general, reliable patterns have not been found, nor, perhaps, should they be expected; but there is evidence that a few gross quantitative signs may be valid (1, 3).

Special Diagnostic Tests

In addition to tests of general ability, a differential diagnosis usually involves testing for specific qualitative features of performance. Where a question of organicity is involved, tests for concreteness (the Goldstein-Scheerer), for difficulties in the perception of figure-bound relationships (the Werner-Strauss Marble Board among others), and disturbances of visual-motor function (the Bender-Gestalt) may be used.

Use of these tests has been somewhat limited by the absence of specific age norms. Except in cases showing gross pathognomonic signs, the evidence as to whether or not a particular performance is deviate tends to be inconclusive. The problem is further complicated by the fact that some of the qualities dealt with are not readily reducible to quantitative measures. At the present time, however, this situation is changing. With respect to the Bender-Gestalt, for example, the objective scoring system of Pascal and Suttell (1951) has made possible a more reliable assessment of the drawings. Studies comparing endogenous and exogenous groups of children on the test are now being reported in the literature. A review of this material is available in Cruickshank *et al* (4, p. 15-18).

The situation with regard to the Werner-Strauss Marble Board has also improved. Newer and more objective methods of scoring have been developed by Cruickshank *et al* (4, p. 47-49) and by Goldenberg, the latter reported in both Strauss and Kephart (13, p. 215-19) and in Cruickshank *et al* (4, p. 50-52). Tests of this type would be most useful with norms arranged by mental age levels for normal, exogenous, and endogenous groups, together with cutting scores which identify a specified percent of exogenous cases. Cruickshank *et al* have attempted to establish cutting scores for the tests and groups used in their study, but specific age norms are in most cases still lacking.

In addition to the standard tests for organicity, newer techniques for this purpose are also reported by Cruickshank *et al* and Goldenberg (13, Ch. 7). Cruickshank and his co-workers have developed several new techniques which were able to discriminate between cerebral palsied and non-handicapped groups of children.

Test of Social Maturity

Doll's first criterion of deficiency is "social incompetence." As an attempt to measure this variable, he has developed the Vineland Social Maturity Scale (5). This test is administered to an informant other than the subject, and is not a substitute for a conventional intelligence test. Sometimes a "social quotient" will be low by reason of factors other than mental subnormality—for example, emotional difficulties or other special circumstances. The test is useful in assessing possible management problems, gauging the child's readiness to adjust to aspects of a school or other social situation, and the like.

Projective Tests

In some clinical settings, the Rorschach is used extensively in diagnosis of deficiency. Many examiners employ it to supplement intelligence tests if there is any suggestion of a higher potential than the subject is able to utilize. Sarason (1949, Ch. 9) has pointed out that the Rorschach is not adequately normed for defectives. Rorschach in his original work made some generalizations about the perceptions of the typical defectives, but his findings were based on only twelve cases, which were not described as to M.A., C.A., criteria used in deter-

mining deficiency, nor whether or not the S's had been institutionalized. A later study by Beck utilized 69 subjects who were more adequately described, but etiologies still were not specified. Although Sarason called attention to these shortcomings in 1949, a search of the literature since that time does not reveal any new studies which could be called normative. It would appear, therefore, that a Rorschach protocol is to date an inadequate basis for a positive diagnosis of deficiency, although it may be helpful in a negative or postponed diagnosis if there is evidence of serious emotional disturbance. As personality tests, however, projectives often have a useful place in the examination of retarded children to whom they can be administered.

The Case History

Since psychological tests do not reliably discriminate among many of the sub-classifications of retardation, the case history often becomes the single most important source of information in a differential diagnosis. To secure the kinds of factual, detailed data needed in the assessment of a retarded child, a considerable amount of direct inquiry is often required. For example, unless the diagnosis were already medically established, one would ask the mother directly whether she had sustained any illnesses or injuries during her pregnancy, whether the delivery was normal, whether the child had suffered any post-natal injuries or illnesses, etc.

Questioning on other aspects of the history, e.g., developmental, social, and emotional factors—also needs to be specific. Social and emotional factors assume particular importance in the case of children with histories of institutional rearing or early and frequent changes of parent figures. The work of Goldfarb (8) is particularly noteworthy in this connection. One of his studies, for example, indicated that children reared in institutional settings for the first three years of life remained, nine years later, significantly inferior in intellectual and personality development to controls of purportedly comparable heredity who had spent their early years in foster homes.

Questions of differential diagnosis between childhood schizophrenias and deficiency occasionally arise. The clinician who wishes background information on the former condition is referred to the comprehensive annotated bibliography prepared by Goldfarb and Dorsen (9). One important diagnostic sign is a decline from a previously higher level of functioning. Another is the "autistic" child's relative efficiency in dealing with the inanimate environment as compared with his limited use of language—presumably a result of his lack of emotional contact with other people (14).

A complete case history on a retarded child will often require more than one appointment. In the first session, the parent frequently expresses a good deal of feeling about the child and the problems his condition creates for the family. She may give a description of seemingly inexplicable behaviors which are characteristic of the child. Very significant cues may be derived from this descriptive material if the interviewer is alert to them. A mother tells, for example, of her child's tendency to make the same statement over and over; the clinician may note this behavior as a possible instance of organic perseveration. The mother will probably volunteer in detail anything the child can do which seems to her inconsistent with deficiency. Again the experienced interviewer will record the information carefully; the parent may have made observations which are diagnostically useful and not available through ordinary testing procedures.

Reporting Examination Findings

Written reports for the family are often particularly helpful in connection with these assessments. While a letter does not replace an oral conference, it often helps to clarify the findings and also furnishes a permanent record for the family and future examiners. The content of the report to the parents will vary from case to case, but in general it should include at least the following:

1. A statement of the child's present functioning level(s), given in terms of approximate mental age where possible. Names of the examinations given and any variation in standard procedure should be noted.
2. Discussion of any relatively better or relatively poorer areas of functioning.
3. Statement regarding probably etiology together with, where appropriate, suggestions for referral for other, special, examinations.
4. Comments relative to the child's educability—the types and levels of training from

which he may be expected to profit. While special educational centers are all too rare, there are some. Strauss and Lehtinen, for example, have described special teaching methods used with brain injured children at the Cove Schools (12).

5. Suggestions regarding: (a) agencies or schools which parents may contact and sources of financial aid for which they may be eligible, and (b) follow-up examinations of the child by the examiner or another psychologist. (c) Comment relative to the child's personal-social adjustment and any help that may be given the parents in this connection. Specific mention of behaviors they have presented as problems and suggestions for their treatment or management where possible. It may alleviate feelings of frustration or guilt if the parents understand that many of the child's problem behaviors are directly attributable to his handicap rather than to his environment and experiences. (d) Offers of further counseling for parents when necessary (or referral to resources where it can be offered).

In the event that schooling is planned for the child, a report to his prospective teacher may also be in order. If the teacher is a graduate of a program training teachers of exceptional children, her background will probably enable her to make use of a considerable amount of technical information from the tests. If she is an unspecialized classroom teacher, she will require more explanation of the terminology and concepts and it is desirable to talk with her in person, if possible, as well as providing her a written report. In either case, a teacher will need to know:

1. The general classification of the disorder.

2. The level(s) at which the child can be expected to perform.

3. Any special strengths or weaknesses he may have—for example, whether he is better able to learn through one modality than another. Some brain-injured children, for example, learn better from material presented orally than visually, and vice versa.

4. How to recognize symptomatic behaviors and any feasible suggestions which may help to cope with them. Like the parents, the teacher can be spared frustration and self-reproach if she can recognize the limitations, both in intellectual achievement and in social behavior, which a particular handicap may impose upon a child.

5. To whom she may turn with specific problems. If it is possible for him, the examiner may wish to offer his services as consultant on a continuing basis. If not, he should encourage the teacher to contact another clinician for this purpose.

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Newer Methods of

TEACHING READING to the PARTIALLY SEEING CHILD

EDITH COHOE

THE ATTAINMENT of good reading ability is extremely important for the partially seeing child. Reading can help him understand himself, his handicap, and what he can do about it. Success in learning to read contributes to his self-confidence and prepares him to take his place in the community. Whether he will learn to read up to his potentialities, however, depends largely on his teachers and the equipment at their disposal. His teachers should have definite training in helping the visually handicapped, and also should possess special knowledge and preparation in the field of reading. Among other things, they must use procedures adapted to the individual child's condition and need, and employ the mechanical devices and aids that will enable the child to find pleasure and enjoyment in reading.

In order to enrich his curriculum with resources of various classrooms and teachers, school systems in this country have set up several administrative plans. There are three main plans and doubtless many variations of them: the *Cooperative Plan*, the *Resource Room Plan*, and the *Itinerant Teacher Plan*. The older plan of segregating partially seeing children for their whole curriculum is rarely used today.

In the *Cooperative Plan* the child attends a centrally located school having a special room equipped to meet the needs of partially seeing children. A special teacher instructs the children in subjects requiring much close eye work: reading, spelling, written language, handwriting, arithmetic. Typewriters are usually provided and instruction is given. For other classes and activities—perhaps social studies, science, art, music, and gym—the children join normally seeing pupils in their respective grades.

In the *Resource Room Plan*, as in the Cooperative Plan, the child attends a centrally located school. However, he is enrolled in a regular classroom. It may be a self-contained room, or he may attend classes in a platoon-type organization. For subjects and activities requiring close eye work, however, he goes to an especially equipped Resource Room under a teacher trained to instruct the partially seeing.

In the *Itinerant Teacher Plan*, the child attends his neighborhood school. A teacher who provides special instruction for the partially seeing visits the school at stated times and for stated periods. He provides special reading material and mechanical aids for the child to use in the regular classroom, interprets the child's eye condition to his regular teacher, and offers teaching suggestions. In some instances, he gives the handicapped children instruction in the language arts.

Of the partially seeing children in the United States at the present time, only a small proportion is enrolled in such special programs as those described. According to the National Society for the Prevention of Blindness the number is 8500 out of a total of 82,600. Furthermore, a considerable number of partially seeing children who have other handicapping conditions, such as mental retardation and cerebral palsy, seldom receive specialized service for visual difficulties.

It is urgent that the partially seeing child experience success in learning to read. Accordingly,

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this paper discusses four important factors in the reading program:

1. Establishing reading readiness before introducing the beginner to systematic instruction in reading
2. Providing procedures and materials to make the act of reading easier
3. Emphasizing thinking while reading with a view to encouraging a clear grasp of the author's meaning; encouraging insight and reaction to what is read
4. Relating reading to the other language arts.

Establishing Reading Readiness

Among the important factors that influence readiness for reading are age, sex, general intelligence, visual and auditory perception, physical health and maturity, emotional and social development, background of experience, comprehension and use of oral language, and desire to learn to read. The most common measures applied to estimate reading readiness are general intelligence tests, reading readiness tests, and teacher observation and inventories.

In the Detroit Public Schools, the *Detroit Beginning First Grade Intelligence Test* is administered to all children just before they complete the kindergarten program. At about the same time they are given the *Detroit Reading Readiness Test.* The illustrations in both of the tests are large enough for most partially seeing children to interpret with ease. A careful review of 12 other reading readiness tests on the market shows clearly that the illustrations are too small and include too much detail for partially seeing children.

The *Detroit Reading Readiness Test*[1] can be administered to 10 or 12 normally seeing children or five or six partially seeing children at one time. This test requires no reading and can be given in approximately 35 minutes. The fact that the children are provided with dark colored crayons for marking, rather than with pencils, is an added advantage for the visually handicapped. The test is divided into six subtests: Vocabulary, Visual Perception, Motor Control, Visual Retention, Delayed Recall, and Immediate Recall. There is also an optional test, Auditory Discrimination. However, it is desirable to administer the latter test to the visually handicapped child because he is more dependent than the normally seeing on auditory discrimination. Only one subtest, *Visual Retention of Forms,* has a time limit. For this test partially seeing children should be given about twice the specified time, though this may be modified in terms of the severity of the handicap.

Reading readiness tests attempt to measure the particular abilities of mental functioning that are most closely related to success in reading. Although the findings of the test do not correlate perfectly with success in reading, they are helpful if used along with other measures of readiness.

Another method of determining readiness is the judgment of the teacher who has had several weeks in which to observe his pupils and converse with them individually. The teacher may also obtain helpful information from talking to the parents. Observation may range from the casual to the more objective in which the teacher identifies many specific characteristics of the individual child and records them.

Using the test results (both intelligence and reading readiness) in combination with the teacher's judgment and inventories, an estimate of the child's readiness can be made which will prove accurate in most cases. If the test results and teacher judgment disagree, further study of the child is needed. An individual psychological examination may be necessary.

In light of all the information gathered, the children are divided into those who are ready to learn to read and those who are not. Those who show reading readiness should begin with experience stories; this provides an introduction to the pre-primer books. Experience reading can also supplement other reading after the children have begun to read in a basic series.

The other children will enter a pre-reading curriculum. Test results will show what the teacher needs to supply to each child; for example, for one it may be interest in reading, and a broader background of experience; for another, training

[1]Information concerning this test is available from Walter Gleason, administrative assistant, Information Service, Detroit Board of Education, 1354 Broadway, Detroit 26.

in listening and in working with other children may be required.

Let us consider the specific elements of reading readiness in which the partially seeing child is likely to differ from the normally seeing. When partially seeing children enter the first grade they are usually like other children in the following respects: age, health, and intelligence. Also, like other children, vision is their chief avenue of learning. They may be superior in auditory perception and memory because they have had to depend on their hearing more than do normally seeing children.

Children with deficient vision are likely to be handicapped in their social and emotional development. Parents often overprotect such a child so that he does not develop normal personality traits.

Partially seeing children are greatly handicapped in broad visual perception. In looking at objects and signs they do not see the details but only general size, shape, and color. In addition, they may have discomfort in looking closely at objects. These factors decrease the acuity of their perception, their background of experience, their interest in reading, and their competence in oral language. Because of these limitations they usually need a longer period of reading readiness.

To help the child grow socially and emotionally the teacher should enlist the cooperation of parents in removing pressures, jealousies, and fears. Home calls and conferences with parents are helpful for this purpose. Also, the classroom should have a comfortable atmosphere that promotes good mental health. The children need much motivation and praise as they progress from one level to the next. Authorities agree that children who overcome their difficulties improve emotionally.

Both interest and background experiences can be increased by taking the children to different parts of the school and to such community places as the grocery store, a fire station, and the post office. Conversation periods and dramatizations undertaken as a result of the trips aid in vocabulary development. Interest and background experiences can also be increased by selecting suitable books to read to the children as well as stories to tell to them. Children will enjoy looking through the picture books after the reading, and even retelling the stories orally from memory. In this connection it should be noted that many partially seeing children come from low socio-economic homes where little reading is done, or where both parents work and do not have time to answer the children's questions.

It is important for the teacher to emphasize auditory perception for partially seeing children and to provide good models of speech. He should speak slowly and distinctly and insist upon accurate enunciation and pronunciation. Auditory skills can be developed by such methods as having the children listen for words that have the same beginning or ending, telling a brief story and having the children repeat it, and teaching poems and songs.

In compensating for poor visual perception the children should engage in such activities as modeling with clay, finding similarities and differences in objects, drawing or painting pictures, describing or finding missing parts in pictures. The children should be provided with large, clear pictures which have a minimum of detail and strong, contrasting colors.

Providing Procedures and Materials

Many partially seeing children must expend real effort to distinguish the reading matter. Any increase in the effort to see is likely to result in a decrease in the ability to think and remember what is read. In addition, the child's difficulty in seeing may cause eye-strain, irritation, and general fatigue. Therefore, teachers should exercise strenuous efforts to make reading satisfying for the partially seeing.

In order to provide the best conditions for the child's reading, the special teacher requires full knowledge of each child's needs as indicated by the eye specialist's reports and recommendations. Children with certain eye defects usually show definite tendencies in reading.

1. Children with nystagmus, and those who see only through the center of the lens, show more head movements than others. They have trouble in keeping the place in the book. Bookmarks used above the line are helpful. The use of the bookmark should be discontinued if (or when) the

child no longer needs it. These children fatigue quickly and usually read efficiently for only a short period.

2. Children with a central lens opacity may read more easily when looking through a slot made in black construction paper placed on the printed matter. The slot exposes two or three lines of print.
3. Hyperopic children may tire quickly when using their eyes at close range. Short periods of concentration and interesting material help them.
4. Myopic children may have a tendency to read for too long periods because it is easy for them. They should be encouraged to take an active part in the oral phase of the program.
5. Children with albinism and aniridia may read most comfortably with lower levels of illumination.
6. Aphakic children, since their eyes no longer have the power of accommodating for near and distance reading, nearly always need bifocal lenses in their glasses.
7. Children with optic atrophy usually accept magnifiers (low vision aids) more readily than do partially seeing children with certain other eye conditions. Some children with macular degeneration and choroiditis (depending on the type of lesion) derive much benefit from these aids.

Many partially seeing children do not attempt to use their vision to the maximum. They need much interesting material as well as extra help in observation.

Children (particularly those in the lower age groups) may experience an improvement in vision after using their eyes for reading and other near-point activities. It is not unusual for the young child's corrected vision to increase from 20/200 to 20/100 or better as he uses his eyes for reading activities and near point work. The use of extra large type should be discontinued whenever the child can read smaller print with ease. This will help to increase his reading span or sweep.

It is urgent that the teacher apply certain procedures that have been found helpful with all types of partially seeing children. These are:

1. More gradual instruction than that for normal children. The teacher should stay longer at each level of reading before increasing the difficulty, in order that the material will make a deeper impression on the child.
2. More practice in using the various aids to word recognition. These aids are picture clues, context clues, word-form clues, structural analysis, phonics, and the dictionary. Also, the child needs a larger sight vocabulary than do other children before starting phonics.
3. Extra help in visual discrimination. It is difficult for partially seeing children to differentiate between letters and words that look somewhat alike, for example, **n** and **m**; **now** and **how.**
4. Much motivation, praise, and encouragement in order to hold and promote the interest of the children.
5. More time to complete assignments or adjusted assignments. Partially seeing children usually do both oral and silent reading more slowly (from two to five times) than do other children.
6. A team approach through the special teacher's consultation with the school personnel, eye specialist, and psychologist in order to help each child develop optimum reading ability.
7. Periodic appraisal of achievement with regard to personal adjustment, eye condition, and reading ability. This should be followed by correction of the difficulties.
8. Much emphasis on developing the child's confidence in his ability to progress. Older partially seeing children who have not had special instruction or reading matter may be considerably retarded. Secondary emotional problems may further "block" them. By starting on material which they can read easily, and then gradually moving to

more difficult material, their confidence is restored.

9. Greater attention to good reading habits with regard to posture, lighting, size of print in the reading matter, and eye rest after near-point work.
10. A thorough understanding of the individual eye condition and a knowledge of how long the child can read without discomfort or fatigue. By the time the partially seeing child has reached the upper elementary grades, he should be given this information.

It is of utmost importance to insure the most favorable physical conditions for reading and to employ every educational tool that will facilitate the act of reading. In this connection, the following items require attention.

1. Abundant Lighting

   Most partially seeing children need higher levels of lighting than the normally seeing. The present standard is 50 foot-candles or more of evenly distributed and diffused light.

2. Gray-Green Chalkboard and Large Chalk

   Gray-green and blue-green are the preferred colors for chalkboards. Large-size chalk (one-half to one inch in diameter), white and comparatively soft, makes broad, heavy lines. The child should do part of his written work at the chalkboard. It is especially relaxing for the young child after doing close eye work at his desk to write or draw on the chalkboard where he uses the large muscles of his arm and easily sees his work.

3. Special Desks

   Movable desks enable the child to be in the center of class activities and in the best place in regard to lighting. Adjustable tops are essential. Some children require a desk top that adjusts to a 50 or 55 degree angle in order to bring the material close enough to the eyes for comfortable reading and for good posture.

4. Dull-Finish Paper and Heavy Pencils

   Unglazed, buff, or cream manila, 9 x 12 paper is practical. If ruled paper is used, wide green lines are more satisfactory than black. Pencils with fairly soft, heavy lead make a broad, clear line.

5. Books with Large Type

   Books, including textbooks and school dictionary, with large type, dull-finish paper, and good margins, are essential. Generally speaking, partially seeing pupils up to the fourth grade read 24-point type most comfortably, while pupils in higher grades find 18-point type better. Some junior and senior high school pupils can read 14-point and 12-point type with ease, as do some younger partially seeing children.

6. Manuscript Writing

   Manuscript writing, like printing, is more legible than cursive writing and facilitates the learning of reading. In addition, young children can carry it out faster and more easily than cursive writing. Partially seeing children are taught manuscript writing and their teachers also use it.

7. Large Type Typewriters

   Beginning in grade four, typewriters with large size type (18 point) are used by many partially seeing children. Touch typing enables the pupil to complete assignments faster, reduces the amount of close eye work, and is an aid to vocabulary growth in that the child obtains a good, clear image of each word he writes.

8. Recording Machines

   Dictaphones may assist in teaching typewriting and in doing assignments. Lessons on tape recorders are another means of learning by listening. The mechanical devices reduce eye use, save time, and help the child become more independent. Occasionally a partially seeing child will listen to a tape recording of a lesson that is difficult for him to read because it is available only in small

print. Listening to the recording gives him familiarity with the material. He may then read the small print to find certain main points or to make a summary.

9. Record Playing Machines

Record playing machines, including the Talking Book, are used in presenting much of the best literature for children. They increase the amount of material that the child can assimilate.

10. Television

Television has many advantages for partially seeing pupils. The lessons usually have much viewing appeal: the use of films, pictures, maps, and other visual aids make reading more meaningful.

11. Magnifying Devices

Partially seeing children use magnifiers for reading parts of books and newspapers in ordinary print; also for diagrams and figures. Many kinds are available: projection magnifiers (3x or 5x), hand, and stand magnifiers. In addition, the Magni-Focuser no. 10, with 2.5 diameters of magnification, may be worn in front of the glasses.

Emphasizing Thinking While Reading

Emphasis on thinking while reading is beneficial to the partially seeing child, particularly because it promotes deliberate reading. For example, after the child reads the title of the story, the teacher may ask, "What do you know about this?" After the child reads another paragraph or two, the teacher may ask, "What have you learned?" Later, "How do you think the story will end?" Such questions help the child to relate his earlier experiences to the material and, at the same time, give him eye rest.

The following practices help to promote thinking while reading and also provide variety in vision activities.

1. Emphasis on expressive oral reading in the primary grades as opposed to word calling.
2. Emphasis on silent reading for thought in the upper grades.
3. Opportunities to carry what is read into other types of action, for example, discussion, written work, art activities, construction, dramatic activities.
4. Provisions for a wide variety of books, materials, and experiences at all grade levels, and the encouragement of free reading.
5. Much help in adjusting the rate of reading to the situation, for example, skimming for general impressions, or reading intensively and thoughtfully for evaluation.
6. Improvement of the children's power for imagery by means of drama, poetry, arts and crafts, and "do-it-yourself" books.
7. Development of the children's listening skills and auditory learning by such means as (a) reading many stories and poems aloud to them, (b) having normally seeing students read assignments aloud, and (c) using the mechanical devices previously mentioned.
8. Use of trips (zoo, museum, concert) to widen children's background and experience and give meaning to the words they read.

Relating Reading to the Other Language Arts

Recently stress has been placed on the fact that the teaching of reading must include attention to its relationship to the other language arts: spelling, handwriting, spoken language, and written language.

1. Reading and Spelling

Both reading and spelling require the ability to recognize and remember words. In order to avoid poor reading and poor spelling, partially seeing children must be taught to examine words carefully, noticing likenesses and differences. Analysis of a child's spelling errors may indicate to the teacher the means of helping him in reading.

2. READING AND HANDWRITING

Failure of a partially seeing child to see words clearly may account for both poor reading and inferior handwriting. Using manuscript writing and the typewriter may help in this connection.

3. READING AND ORAL LANGUAGE

Reading and oral language are dependent upon each other. The child who habitually uses good English is more likely to understand what he reads because of his familiarity with the language forms used. He is likely to read rapidly, since he can anticipate what is coming. Likewise, an abundance of good reading contributes to oral language by broadening the child's background of ideas, enriching his oral vocabulary, and providing an acquaintance with correct language forms.

4. READING AND WRITTEN COMPOSITION

Reading and written composition are mutually dependent. Many of the ideas that the child expresses in his written papers are derived from his reading. His writing vocabulary is extended through reading. His reading constantly presents him with models of good writing.

Today we know much about differences in individual children. Partial vision is just one individual difference to which we should adapt our educational procedures and materials. In this way we emphasize the abilities and assets of the children while strengthening the areas of weakness.

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THE HYPERKINETIC CHILD

HAROLD F. BURKS

SOME time ago this writer (9) attempted to describe the characteristics of children with possible brain impairments who were neither mentally retarded nor cerebral palsied. As pupils in regular classrooms, it was felt these children needed "special diagnosis, special understanding, and special techniques of instruction." The exhibited pattern of behavior is similar to the "organic syndrome of behavior" defined by Bradley (3) and the "hyperkinetic syndrome of behavior" ably described by Laufer and Denhoff and Solomons (22). For the purposes of this paper, we shall refer to this individual as the "hyperkinetic child."

Such children should not be thought of as suffering a "brain injury" for such a term is misleading. The writer (7) believes it is difficult to discuss brain injury because this is not a specific medical concept. The underlying disorder might be chemical, metabolic or structural in nature.

Central to the theme of this paper is the postulate that brain pathology can affect the neural integration of the brain, and this interferes with its ability to pattern incoming stimuli, to structure thought processes, and to organize motor output. Not all of these functions need be affected: much depends on the kind, degree and locus of the impairment. But the hyperkinetic child must *clearly* and *chronically* show most of the following symptoms because the syndrome is defined by behavior not by the underlying organic brain dysfunction.

The impulse disorder suffered by the hyperkinetic child makes him especially prone to the acquisition of emotional problems. Our list will not include characteristics of emotional disturbances because they are *learned* traits not necessarily demonstrated by such children. We are interested in only those symptoms which are above and beyond the control of the afflicted individual. Here is the list:

1. Short attention span.
2. Restlessness and overactivity (motor-driveness).
3. Poor judgment and impulsive action.
4. Low frustration tolerance and irritability.
5. Poor perceptual and conceptual abilities (reflected in serious academic deficiencies).
6. Defective memory.
7. Poor muscular coordination.

A brain dysfunction is thought to be a necessary producing agent and its presence must either be demonstrated or implied. Knowledge of its probable existence helps chiefly by:

1. Making us aware that the child is physically handicapped and is unable to stop showing these symptoms just because we demand he do so.
2. Helping us to formulate educational methods which circumvent the organic impairment. However, this can be done only if we understand the nature of the disturbed brain processes.

The children discussed in this paper demonstrated the *primary* (organic) symptoms listed above and many showed *secondary* or emotional symptoms, in addition.

This paper will attempt to do the following things:

1. Examine the procedure employed to screen out hyperkinetic children.
2. Analyze evidence which might help to establish an association between behavior symptoms and criteria of brain pathology.
3. Scrutinize theories which assist in the understanding of why brain impairment might produce deviate conduct of this nature.

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Selection of Children

Since the hyperkinetic child is defined by his behavior, a rating scale was constructed by the author (8) listing symptoms described in the literature to be shown by known brain injured children. Briefly, the questionnaire clustered items in three general areas:

1. A *vegetative-autonomic.* Those unlearned manifestations rooted in the non-conscious organic expression of poor neural organization (i.e., primary symptoms).
2. *Perceptual-discriminative.* Those cognitive abilities such as reading, spelling, and writing, which depend on neural integration, in part, but which may be modified by learning.
3. *Social-emotional.* Those learned patterns of conduct explained as the expression or drainage of emotional tension (secondary symptoms).

In order to standardize the scale, five hundred twenty-four pupils (all children in one school, Kindergarten through eighth grade) were rated by the teachers of the respective children. None of the items on the scale were found to describe the majority of children. Surprisingly, about eight percent showed a large number of the symptoms from a moderate to a severe degree. For the reader interested in such matters, the scale proved reliable (that is, individual children were evaluated in much the same manner when teachers were asked to rerate them later).

The scale has consistently proven its worth as a useful preliminary device in screening out children who manifest symptoms thought to be controlled in large part by underlying brain impairment. What evidence do we have that such organic pathology exists? In a few cases the cerebral insult might be observed directly (from examination of the brain), but in most instances it can only be inferred from measures of the individual which point to a brain dysfunction. We will discuss these measures now because their application to children with a hyperkinetic pattern has built a strong case for the supposition that an organic impairment of the brain is an associated condition.

Evidence for Organic Impairment

This section of the paper will discuss experiments conducted by the author. A large number of hyperkinetic children were compared with normally behaved children. None of the investigations can be treated in detail, but the main findings are indicated. Some related studies from the literature are included. Six major areas of concern are listed:

1. Evidence from electroencephalographic studies
2. Evidence from other neuro-psychological devices
3. Evidence from developmental history records
4. Evidence from psychometry
5. Evidence from neuro-chemistry
6. Evidence from neurological examination

Evidence from electroencephalographic studies: One of the most widely accepted criteria of organic brain pathology is the electroencephalogram (EEG).

Results obtained in EEG practice are based on a well known principle that conduction in a nerve fiber is associated with a change in electrical potential. Much electrical activity occurs in the brain. This action is picked up by electrodes attached to the head. After proper amplification and by the use of recording devices, the wave motions can be observed, measured, and analyzed.

Much of what is seen in electroencephalographic recordings is not well understood. Notwithstanding, organic pathology standing toward the cortex, or surface of the brain, often distorts or changes the nature of brain activity in typical ways which is understood by the experienced electroencephalographer. The chief value of the EEG seems to have been in the study of convulsive states of the brain. Attempts to relate wave patterns to cerebral dominance, intelligence, psychoses, neuroses, and most other psychological states have not been positive enough, at least to the present time, to suggest more than minimal connection to any of these factors.

Now it is interesting to note many researchers have discovered a positive relationship between abnormal readings and certain types of behavior disorders in children. No attempt will be made to cover the investigations in detail. The interested reader should direct his attention to the bibliography at the end of the article for pertinent references (4, 5, 6, 10, 12, 13, 15, 16, 17, 18, 19, 24). The children employed as subjects in these studies

seem to be largely of the hyperkinetic variety. Investigators consistently find from 50% to 75% of the behavior problem children demonstrating abnormal EEG tracings. Only 5% to 15% of normally behaved children show questionable tracings.

The author studied 137 hyperkinetic children and found a total of 78 (56.9%) of the tracings were abnormal. A total of 52 (38%) were normal and 7 (5.1%) were borderline tracings. Sixty percent of the abnormal tracings were of the paroxysmal non-focal variety: that is, the atypical wave forms came in rhythmical bursts of activity over most of the cortex. The presence of this type of abnormality ties in with theories advanced by Lacey and Lacey (20) concerning the role of the autonomic nervous system in stimulating the cortex (to be discussed later in this article). A control group of children representing a cross-section of the population were also studied; 9 of 94 children or 9.6% showed abnormal tracings; 5 (5.5%) demonstrated borderline tracings; and 80 (84%) exhibited normal tracings. In comparison with the previous grouping of hyperkinetic children, this distribution was statistically very different.

The EEG has, then, provided us with positive evidence that brain wave patterns in hyperkinetic children are often distorted in ways suggesting organic pathology. What about hyperkinetic children who exhibit normal patterns? Later we shall see that these individuals might suffer sub-cortical (deep brain) impairment which is not reflected into the cortex and, consequently, not seen in EEG tracings.

Evidence from Neuro-psychological Devices

Recently investigators (2, 11, 14, 23) have turned to other instruments in the hope light will be shed on brain processes. The EEG is a device with limited potential insofar as it can reflect the complicated and patterned rhythms of the brain. Furthermore it tends to measure only surface activity. Finally, it is limited because ordinarily the brain has not been made to do anything during the examination. It is this writer's opinion that certain valuable data about brain capabilities can be gathered before and after the brain has been driven into activity. The brain wave apparatus, in itself, is not sufficient to measure cerebral efficiency or adaptability.

One instrument found useful in screening out individuals thought to be suffering brain injury is the Flicker Fusion Test. This device employs a flashing light that can be made to flicker at higher and higher frequencies until the subject reports that the light "fuses" into one steady light. Experimental research at this point would indicate that brighter children "fuse" at higher frequencies than do duller ones of the same chronological age. The writer has found many children of the hyperkinetic variety fusing at unusually low frequencies.

Another device, probably assessing similar brain processes, is the Archimedes Spiral After-Effect Test. This instrument consists of a flat, black record on which is painted a white spiral. On one side the spiral goes from the center to the edge in a clockwise direction and on the other side it goes in a counter-clockwise direction. Most adults get a visual after-effect of expansion or contraction (depending on which side is used) when the disc is stopped after a score or so of revolutions on a phonograph turntable. It has been reported (23) most brain injured adults do not get this after-effect. Systematic exploration with this instrument has not been employed in the area of child development where it might help shed light on brain maturation.

The writer tried this instrument in a standardized situation on several hundred first, fourth and eighth grade children with interesting results. 72% of first graders, and 74% of fourth graders got some kind of after-effect (although it should be mentioned that fourth graders got more stable and longer lasting effects). Eighty nine percent of eighth graders saw the after-effect and, in contrast to the younger children, nearly all those who could not report an after-effect were having difficulty in social and academic areas.

What about the behavior problem children? A rather exciting fact emerges. They were the group who experienced the greatest difficulty of all perceiving the illusion. For instance, at the fourth grade level 19 out of 35 behavior problem children (or 54%) saw no illusion, while only 64 out of 274 (or 24%) normally behaved children could not see it. Statistically, the two distributions were significantly different.

Is this great difficulty in seeing an after-effect shared by any other special group? Very slow

learners have trouble, but it was found that many of them are seen as hyperkinetic children also. Do poor readers who are not hyperkinetic exhibit unusual difficulties in seeing the after effect? *No, they do not.* The incidence of failures to see the illusion are no greater amongst this group than among the general population.

One word of caution is needed. The reader who wishes to use the above devices in case diagnosis should proceed with care. The instruments are valuable for statistical studies on groups of subjects but to this point have not proven their worth in predicting individual performance, particularly for younger children.

Evidence from Developmental Histories

The developmental history must not be overlooked as a possible source of valuable data. If the questions ask for information that is likely to be known by the respondent, and if they are posed properly so that he understands clearly the nature of the queries, then criticisms about validity and reliability of answers can be kept at a minimum.

The author constructed a developmental history questionnaire which was filled out by parents of fourth grade children. A total of 204 questionnaires were returned.

The criteria employed for deciding whether any event was pathological or not were clearly defined in advance. Space does not allow for description of these standards, but provisions are being made to publish them at a later date.

In general, events surrounding the birth process appear to play a role of great significance. Unusually long or short labor, anoxia (blue baby), breech or other unusual presentation, hemorrhaging of mother, cord about neck, twin birth, Caesarian section, and head misshapened or marked were reported to be much more common occurrences for hyperkinetic children than for normal children. There were over five times as many premature births reported for the hyperkinetic group. Severe attacks of meningitis or encephalitis, and incidents of blows to the head involving concussion and unconsciousness were also found to be more common for this group.

These findings appear significant. It is difficult to establish a relationship between an event and subsequent behavior deviations, but it is most intriguing that the hyperkinetic group had more chances of being affected than the remainder of the population. Do poor readers without the hyperkinetic syndrome show an unusual number of unfortunate events in early childhood? *No, they do not.* These findings are consistent with results obtained from the use of after-effect devices.

Evidence from Psychometry

Our discussion about evidence offered us from the use of various psychological tests are prefaced with remarks reflecting the bias of the writer.

In general the field is a complicated one. Pitfalls abound. The tremendous complexities and capabilities of the human brain are not well understood. Our scales reflect only the crudest parameters of its activities.

The brain is the great organ of adjustment. Evolution has provided us with faculties of learning which are truly marvelous. We hypothesize the child with organic brain pathology has more than the usual degree of trouble in patterning his perceptions and conceptions of the world. What is equally damaging to the learning process is his usual lack of motivation. Anyone who has worked with such a child knows failure has been his constant companion. Failure is disheartening. The child perceives himself as inadequate and refuses to make further effort. The lack of concentration the child demonstrates is not only organically rooted but is also a reflection of this process of failure. Attention or concentration is the other side of the coin of learning.

Few tests today purport to measure the factors of motivation or concentration, but it is precisely in these areas a child with brain dysfunction may have his greatest difficulties. In addition, memory faculties often seem affected, but very few ability tests attempt to evaluate memory (probably there are different kinds of memory).

The child with suspected brain impairment should be tested with the following aims in mind:

1. Tests must be given under very favorable environmental conditions and good rapport must exist between the psychometrist and subject.
2. Tests requiring abstractions, concentration and memory are most likely to be influenced by stress or extraneous stimuli.

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For the sake of reliability these scales should be given more than once.

Hyperkinetic children suffer impairment of the brain which attests its presence with symptoms common to those exhibited by known brain impaired children. The literature on brain injured individuals is too extensive to review. The results obtained by the author approximate those found by others. Some general statements, however, are in order.

1. Perceptual disturbances are common. The intriguing fact emerges that those brain functions operating between sensation and abstract thought, those processes which "make sense" out of the stream of stimuli coming from the sense organs of the brain, are somehow disrupted. For instance, the Bender Visual Motor Gestalt test (1) tends to be reproduced poorly by brain impaired children regardless of whether the pathology lies in cortical or sub-cortical organs.
2. Conceptual disorders are frequently noted. The ability to generalize or to classify the "commonness" of elements is largely (but not wholly) a matter of the integrity of the cortex. Language is a high order function involving many kinds of abilities included among which are ideational competencies.

   The reader might be interested in a small study conducted by the author along these lines. A group of hyperkinetic children demonstrating abnormal EEG's (indicating cortex involvement) were compared with another group of hyperkinetic children exhibiting normal EEG's (the organic involvement might be lower in the brain), on the Wechsler Intelligence Scale for Children. An interesting pattern developed. The former, or cortex involved group fell significantly low on five out of six of the verbal tests while the latter group fell down in only one of the verbal tests (arithmetic). In the non-verbal tests both groups fell down on the coding subtests which many of us consider to be more like a verbal than a performance test. This experiment is mentioned because of the possible help it gives us in making a better differential diagnosis. It should be mentioned that test pattern or profile scores tend to "scatter" much more for hyperkinetic children than for normal children.
3. Hyperkinetic children tend to be retarded in academic subjects. Achievement tests demonstrate this over and over. In one study conducted by the writer, involving 62 children in grades three to eight, inclusive, the average child was about one year behind his grade level even though he tended to exhibit an average IQ. Reading is an especially difficult subject. The author believes this is true not because of malfunctioning visual sensory structures, but primarily because of inefficient patterning and processing capabilities of the brain. The problem ordinarily lies in the brain, not in periphery structures.

   The researcher who looks to psychological tests for definitive and specific answers concerning this type of child will find himself disappointed many times. Loss of cortical function is a most difficult thing to prove, especially if the deficiency has existed from birth (as it has for most of these children). Evaluation of emotional status is even more of a problem. Nothing prevents the hyperkinetic child from becoming neurotic or even psychotic if proper conditions exist for the development of such disorders. We must never conclude that hyperkinetic children exhibit one type of personality structure, even though the underlying poorly patterned and erratic nervous system often leads to poor character formation—a danger faced by those with impulse disorder.[1]

[1]We should not underestimate the degree of complexity of the problem of the relative influences of organic and environmental conditions. Children are more or less susceptible to environmental pressures depending on the locus of the brain dysfunction. Temporal lobe impairment, for instance, can react very unfavorably on conduct. Destructive lesions in this area may cause gross disturbances in behavior control. Feeling and mood tones are influenced by temporal lobe nerve centers, so the afflicted child may react in an unusual or bizarre manner if these groups of cells are impaired.

Evidence from Neuro-Chemistry

In recent years increased interest in the chemical treatment of behavior and mood disorders has occurred. All of us have been intrigued with the success of the tranquilizers which seem to act primarily on mid-brain structures. This is known because sleep, blood pressure, and other vegetative processes are affected (controlled by deep brain organs) while cortical functions are relatively unaffected.

What about the effect of the medications on the hyperkinetic child? The writer cannot overemphasize the fact that primary symptoms disappear after proper drug therapy for many, but not all hyperkinetic children.

Several years ago the author asked teachers to rate 43 hyperkinetic children before and after the children had been started on amphetamine therapy (benzedrine sulphate). Amphetamine, by the way, has been used since 1937 in the treatment of behavior problem children (3) and a considerable amount of controversy has taken place about its selective effects on the brain. At any rate, the teachers had said originally that they thought that these 43 children had improved in conduct, and this fact was borne out after the ratings were analyzed. The rating scale previously described was employed. One of the important findings included the fact that it was in the vegetative-autonomic area that these children improved the most, indicating the probability that amphetamine also acts primarily on sub-cortical organs. The other significant result of the study concerned the different degree of improvement for children with a predominantly cortical pathology versus those with sub-cortical impairment. The latter group improved to a significantly greater degree than did the former, again indicating the probability that amphetamine acts on lower brain centers.

Evidence from the Neurological Examination

Remarks under this category must of necessity be brief. The writer is not a physician and so is not qualified to give a neurological examination. However, he has observed many hundreds of children both in and out of hospital settings while they were being examined by medical specialists. This background of experience leads us to make the following statements:

1. The neurological examination is often the least helpful single criterion of organic involvement. When there are obvious signs of impairment (tremor, poor reflex development, etc.) the diagnosis of brain pathology is made with much more surety. The hyperkinetic child seldom shows these positive symptoms.
2. In a general way, the hyperkinetic child is seen by others as "clumsy." This awkwardness is characteristic in postural balance, skipping, running, hopping, finger to finger, and finger to nose exercises. This picture of uneven motor development is noted particularly in the child below eight or nine years of age.

SUMMARY: The hyperkinetic child is first of all defined by his behavior. The evidence just presented might indicate that the observed conduct is rooted in organic brain malfunctioning, but problems in differential diagnosis are admittedly complex. However, a diagnosis of organicity will always be strengthened by a multiplicity of signs. It will often be difficult to assess the relationship of a severe attack of measles encephalitis in early childhood to later behavior difficulties. But if a child showed (1) changes and regression in personality after the illness; (2) dysrhythmic patterns in the EEG tracings; (3) depressed mental test scores, particularly in intellectual areas; (4) significant physical signs derived from a medical examination; (5) flighty, nervous or inattentive behavior in the home, or at school; (6) if he alone demonstrates these signs in company with his siblings we might be justified in assuming the illness led to an organic brain dysfunction with the behavior difficulty as an associated result.

Theories Concerning Brain Malfunction

The presence of organicity must be established because if it can be shown that a rejecting or otherwise disturbed environment is able to produce a chronic hyperkinetic syndrome in children, then most of what has been said by this writer is meaningless. The reader may agree, however, that the presented evidence points strongly in the direction of physical impairment.

What is the nature of this physical impairment? Theories advanced to this date are based on

rather sketchy evidence but that should not deter us from examining them. Little is known about the way the brain actually "thinks." Any hypotheses which extend our understanding should be carefully considered for they may suggest ways to overcome or circumvent cerebral pathology.

Laufer and Denhoff and Solomons (22) outline a theory which might explain why amphetamine effects certain aspects of behavior rather than others (referring to the previously mentioned study conducted by the writer). These researchers found hyperkinetic children to have a lower convulsive threshold than normal children when both groups were given photo-metrazol. The convulsive threshold was raised under amphetamine therapy. The very fact that this threshold could be raised by chemical means tells us that there must be some kind of physical deficiency in the first place. Laufer, et al, believe the hyperkinetic syndrome is due to impairment which in some manner affects the interaction between cortical and sub-cortical centers. The authors believe the pattern eventually disappears when the brain matures in later childhood.[2] They further theorized the application of amphetamine has a specific effect at lower brain levels. This would be quite in accord with the previously reported findings that vegetative-autonomic kinds of behavior were seen by teachers to be the most modified after hyperkinetic children received amphetamine therapy. The vegetative-autonomic behavior was conceived to be largely regulated by deep brain centers.

This brings us to a consideration of just what this sub-cortical impairment might be and how it could modify conduct. A brilliantly executed set of experiments by Lacey and Lacey (20) have set up guide lines for us in this respect. These investigators, by observing certain bodily processes, have noted bursts of activity emanating from the autonomic nervous system which do not seem to be correlated with specific stimuli presented to the subject, or to any reported "inward" feelings of emotion. The ANS seems to be concerned basically with the regulation of bodily processes. The mediation of sex and hunger drives, the control of emotional expression, the pacing and coordination of such activities as breathing, heart rate, body temperature, and blood sugar levels, and the control of vital chemical reactions of the body all come within the province of the autonomic nervous system.

There are characteristic differences between the individuals who demonstrate much of this activity and those who do not. The former tend to be "labile" people who are seen as more high-strung. They have a propensity to react to their environment with wide fluctuations of mood. The latter are "stabile" individuals who are more placid and emotionally stable.

These spontaneous bursts of activity emanating from the autonomic nervous system are evidence of the inherent "restlessness of living matter," according to Lacey and Lacey. This biological "noise" can be increased or suppressed by chemical substances and it can be stimulated by environmental events. The basis for activity must lie in psycho-chemical interactions between islands of cells.

Lacey and Lacey further point out that the autonomic nervous system arouses the cortex into action. Thus the proper conditions for sustained alertness is sustained. Finally, many of the centers in the autonomic nervous system are common to the somatic system so that motor expression is effected. Thus we have the picture of the hyperkinetic disorder: a chemically aroused autonomic nervous system which sparks cortical mechanisms into overalertness and drives somatic networks into excess motor activity.

These theories give rise to an interesting speculation. They suggest the possibility that the hyperkinetic impulse disorder need not be caused by "brain injury" as such. Trauma to the cerebral mass must have occurred for many individuals exhibiting this syndrome, but others may show the symptoms who suffer cerebral chemical imbalance or metabolic disturbance, or who may have inherited a slow maturing brain. Whatever the cause, the clinical picture is much the same for all.

Sub-cortical organs play an all important part in producing the hyperkinetic pattern. Lashley has for years been telling us that the cortex is surprisingly expendable. The writer has seen a number of poor readers with occipital lobe dysrythmias on the

[2]From experience we have found this to be true. The hyperkinetic syndrome is seldom found in older teenagers. However, the damage done to the personality structure in earlier years may be deep and permanent.

EEG who show no impulse disorders. We hypothesize these children have suffered trauma to specific surface areas of the brain which have disrupted visual integrating functions but have not affected deep brain centers. The actual power to perceive, to think and to respond with something more than reflex action lies in the cortex. But the cortex has to be "awake" or ready to respond. Underlying the awareness is a tiny network of nerves in the central part of the brain stem called the reticular formation.

The reticular formation has as one of its functions the job of awakening the brain to a state of attention. Then it assists in specifying or delineating the field of attention, so that pattern emerges. Pattern can only emerge when some impulses are brought to the foreground of consciousness and some are depressed. Suppose these mechanisms of attention arousal and focusing are faulty. Would the individual be able to form good patterns, or would he be able to hold the pattern for any length of time? Probably he would not. He is not under but over attentive because the cortex is sprayed with useless electrical stimuli which the individual cannot suppress from awareness. Abstract reasoning and conceptual thinking require lengthy contemplation of sustained patterns. Mental process of this nature might have trouble existing under the imperfect conditions known above.

The perseverative phenomena noted in so many brain injured children may be tied in with concentration difficulties. The proper and logical shifting of attention also requires stable sub-cortical activity. Pattern is difficult to find. The child finds something successful; he continues to do it over and over.

Some comment ought to be made about after-effect devices. One of the most common types of abnormal waves seen in EEG tracings is slow wave activity. A current hypothesis supposes the brain becomes more "sensitized" when stimuli are perceived, or when thought processes occur. This sensitivity is necessary for proper brain function and is noted in increased wave activity. It is possible the after-effect devices are a kind of measure of the ability of the brain to be sensitized. Possibly individuals who see a good after-effect have a more conductive brain. Brain wave activity may be a reflection of this conductivity. We theorize individuals with the low basal conductivity in the central nervous system have brains which become satiated more slowly and recover from satiation less quickly. The child with the brain dysfunction is simply less flexible. He has trouble receiving and getting rid of the effects of a stimulus. The learning process is impeded.

Certain basic behavior characteristics are shown by hyperkinetic children. These characteristics define the syndrome. Underlying the pattern are organic brain impairments which endanger the neural-psychological integration of the brain. The ability of the central nervous system to pattern responses is affected adversely.

The hyperkinetic child may or may not be emotionally disturbed, depending on the type of social environment the child has had to contend with in the past. If it has been negative and punitive and inconsistent, he is likely to show, in addition, symptoms demonstrated by any child with a functional emotional disorder. If it has been understanding and supportive and firm, he will continue to exhibit the signs which are based in the underlying organic weakness, but he will not develop a personality complicated with learned, unnatural defenses. This should indicate to us that most parents and teachers need much more understanding of the nature of the problem and of the ways to treat it.

In this writer's experience the hyperkinetic child with an overlay of emotional difficulties has presented an almost insoluble dilemma to the classroom teacher. The presence of primary symptoms (poor concentration, hyper-activity, etc.) is bad enough but to have the behavior picture further complicated with social withdrawal or aggressiveness, temper tantrums, or a wilful refusal to succeed academically is simply too much. Usual methods of discipline simply fail or worsen the situation because they do not take into account the severe difficulties the child encounters in patterning his perceptions and reactions to the world in general, and a hostile world in particular. He defends himself as best he can with primitive and immature responses.

Research in the future may lie in two major realms:

1. **Experimentation with certain agents, such as medications, which might**

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alleviate some of the unfortunate effects of brain pathology.

2. **Designing special techniques of instruction which circumvent or alleviate the problems posed by altered mentation.**

If it can be shown that the hyperkinetic child does fit a diagnostic pattern and that appropriate techniques of instruction are needed to educate him, perhaps special classes are the answer. The author established and for three years supervised the first experimental class for hyperkinetic children (all of whom were medically diagnosed as having an organic brain involvement) in the State of California. These children, as a group, improved significantly in general behavior, although many primary symptoms remained. Academic progress was not spectacular, although steady growth was noted. Parents were most grateful for the help they received. The improvement seen in special classes is not matched in regular classrooms.

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ACCELERATING THE READING SPEED OF *6th grade gifted children*

ROBERT A. McCRACKEN

Purpose

IN DETERMINING the reading needs of two sixth-grade classes by the use of an informal reading inventory, it became apparent that silent reading skills were underdeveloped. Of the 56 pupils examined in the two classes only one pupil exceeded the speed of 250 words per minute when reading silently. The purpose of this study is to evaluate a three-week training program for eight gifted children who performed well in all areas of reading except silent speed.

The Subjects

Pupils were selected by three criteria:

1. They rated above 120 IQ on the *California Test of Mental Maturity, elementary S-Form*, given six months earlier.
2. They rated above sixth grade level in both reading vocabulary and comprehension on the *Iowa Test of Basic Skills, Form I*, administered two weeks prior to the beginning of the reading instruction.
3. They exhibited no reading deficiency on the informal reading inventory except the inability to read rapidly silently.

The eight pupils who met these criteria were girls. Table 1 presents their chronological ages, the mental ages, the CTMM IQ scores, and the ITBS grade level scores for reading comprehension and vocabulary.

The Teaching Procedures

The procedures were similar to those used in adult and college reading programs. No mechanical devices were used. The pupils met for nine lessons of 45 minutes each.

During each session at least one practice exercise was read, speed measured, and comprehension checked. All comprehension was done without reference to the text. The *Reader's Digest Skill Builder* for grade 4, part one,[1] was used at the beginning of the program and the *Skill Builder* for grade six, part two,[1] was used for the last two sessions.

Table 1. IDENTIFYING DATA FOR GIRLS RECEIVING READING INSTRUCTION

Pupil	Chronological age	CTMM MA	CTMM IQ	ITBS grade levels comprehension	ITBS grade levels vocabulary
A	11-9	15-2	129	8.2	8.7
B	11-1	14-6	131	8.0	8.2
C	11-4	15-0	133	9.0	8.1
D	11-8	14-2	121	10.6	9.0
E	11-0	16-5	149	10.6	absent
F	11-2	16-6	148	8.0	8.5
G	10-9	15-4	143	7.9	8.6
H	11-5	14-6	127	7.5	9.0

The following ideas were discussed with the group:

1. Speed is related to the difficulty of the material being read.
2. Speed should be shifted to suit the reader's purpose.
3. Rapid reading is an active search for answers (answering the purpose).
4. Rapid reading depends upon what the reader brings to the text.
5. Formulating questions from text clues, recalling known information stimulated by the title and text clues, and reading questions before reading the text speed comprehension.
6. The paragraph is the basic unit of thought.
7. Most paragraphs contain a topic sentence.

The Results

Table 2 gives the results of the rate exercises.

• ROBERT A. McCRACKEN is reading consultant, Fulton Public Schools, Fourth Street School, Fulton, N. Y.

[1] *The Reader's Digest Reading Skill Builders*, education division, Reader's Digest Services, Inc. Pleasantville, N. Y. 1958.

ACCELERATING READING SPEEDS

(*Continued from page 27*)

Table 2. MEAN, MINIMUM, AND MAXIMUM WORDS PER MINUTE, AND AVERAGE PERCENTAGE COMPREHENSION FOR REPRESENTATIVE LESSONS

Lesson	1	3	5	8	9
Maximum	244	414	540	1260	1200
Mean	202	280	450	966	792
Minimum	160	210	360	470	524
Comprehension	89	92	96	81	95

Several reactions were noted as the pupils participated:

1. They were reluctant to accept the belief that word meanings and ideas come from within the reader, that the reader rearranges his understandings from the stimulus of an author's words.
2. On essay questions the pupils did not like to consider more than one answer correct, even when different answers could both be supported by the text.
3. At first they were reluctant to accept reading as the getting of meaning. They said, "I answered all the questions, but I really didn't read it."
4. At the end they were worried about going too fast. They wanted to know how fast they should read.
5. At the beginning they did not feel that they could read much more rapidly, and at the end they did not understand why they had ever read so slowly.

Discussion

The author inferred that these pupils did not want to accept the responsibility required of a mature reader, the responsibility for determining what is worth reading, why it should be read, how it should be read, and when it has been read satisfactorily. This may be a result of their educational environment which does not encourage greater independence.

The nine lessons possibly did little except disinter the latent achievement of these pupils. Probably much latent achievement is still buried. Even these gifted children could benefit from instruction directed to this end.

Generally the concern for speed reading and mature reading-study habits is reserved for college reading classes or high school classes for college bound students. Apparently these skills could be taught much earlier; the gifted children in this study were well ready at the beginning of sixth grade. It seems a tremendous waste to wait until college to help these pupils to exploit themselves. The increased amount of reading that sixth grade pupils could be freed to do in junior and senior high school is yet to be realized.

CEC EASTERN FALL REGIONAL

NOVEMBER 9-12, 1960
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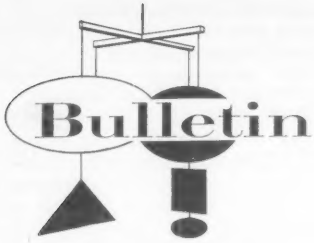

CEC PRES. BIRCH HOLDS 2 MEETINGS TO STUDY ORGANIZATIONAL PROBLEMS

As an organization grows and finds need for change, it must take time to study its own structure and processes to make sure they are fulfilling their functions. Otherwise the organization could, unexpectedly, find itself impeding its own progress. With these facts in mind, Dr. Birch called a meeting of CEC division representatives to assemble at the University of Pittsburgh on June 17-18, 1960, to consider problems in need of clarification concerning their relationships and operation. Persons present included Jack W. Birch, president of CEC and chairman of the meeting; Edna R. Oswalt, president of the Association of Educators of Gifted Children; Albert R. Goldsmith, president of the Association for Educators of Homebound and Hospitalized Children; Fredericka Bertram, president of the Council for Educators of the Partially Seeing; Frances A. Mullen, president-elect of the Council of Administrators of Special Education in Local School Systems; Allen Myers, president-elect of the Division on Teacher Education; and Harley Z Wooden, executive secretary of The Council for Exceptoinal Children.

The principal topics discussed at the meeting dealt with

1. The overall length of the annual conventions of CEC and its divisions
2. Cooperation in convention program development between CEC and divisions
3. Division meetings at CEC regional conferences
4. Representation of divisions on CEC governing bodies
5. Services CEC might offer divisions from its headquarters office
6. Unified membership
7. Billing and collection of dues
8. Divisions as resource groups for CEC federations in the respective areas of division interest
9. Division surveys and action research through CEC federations
10. Coordination of division activities where areas of common interest exist
11. Division publications
12. Relationships between divisions and other outside organizations.

American Education Week

NOW is the time to order materials for American Education Week, November 6-12. AEW Packet contains more than 20 promotional items, costs $2. For further information, write to American Education Week, 1201 16th Street, N.W., Washington 6, D. C.

Theme of American Education Week: "Strengthen Schools for the 60's."

Daily topics: Sunday, November 6, "Serious Students—Stronger Schools"; Monday, November 7, "Interested Parents—Stronger Schools"; Tuesday, November 8, "Able Board Members—Stronger Schools"; Wednesday November 9, "Quality Teachers—Stronger Schools"; Thursday, November 10, "Ample Funds — Stronger Schools"; Friday, November 11, "Challenging Curriculums—Stronger Schools"; Saturday, November 12, "Lifelong Learners — Stronger Schools."

Conclusions and Recommendations

Five general conclusions or recommendations were agreed upon, namely

1. That there is need for some interlocking or coordination of committees between divisions and the Council
2. That Council committees of general interest to divisions should contain division representation
3. That the CEC convention period pattern for 1961, in Detroit, remain the same as in the past, namely, open on Tuesday evening and close with a Saturday noon luncheon, with as many division meetings integrated into that period as practicable
4. That the National Association of State Directors of Special Education, which was unable to send a representative to the meeting, be invited to hold its meetings in the same manner as divisions
5. That divisions retain their representation in the CEC delegate assembly and audit CEC governing board meetings as a means of more actively relating to Council government and operation.

It is obvious from the above that a number of topics were discussed on which no specific recom-

mendations were developed. Some of these were referred to the central office staff and some to the executive committee, either for further information or reaction, or both. Others, in the natural course of events, will fall to established committees for recommendations. More will be published on final actions as events develop.

It was agreed by those present that the meeting of division representatives in Pittsburgh had been fruitful and that the idea should be repeated periodically—perhaps, once a year.

Meeting of CEC Representatives Interested in Large City Chapters

For the following weekend, namely, June 24-25, Dr. Birch called a meeting of CEC representatives of four relatively large cities, most of which are located close to Washington. The group met at the NEA building in two sessions in which the discussions were packed with problems presented and suggestions made for solutions.

Persons present included:

Jack W. Birch, president of The Council for Exceptional Children and chairman of the meeting; Marcella Bryant, assistant membership director, CEC, and recorder for the meeting; Estelle C. Epstein, president, Washington, D. C. Chapter; Margaret E. Faulk, president, Maryland State Federation; Mabel Giszczak, Detroit, Michigan, guest; Elizabeth M. Goodman, Washington, D. C. Chapter, guest; Hans Gordon, director of special education, Philadelphia Public Schools; Kathryn Heinz, past president, Balitmore City Chapter; Richard J. Hess, president-elect, Pennsylvania State Federation; Rosa H. Jones, membership promotion chairman, Washington, D. C. Chapter; June B. Jordan, membership director, CEC; Mary Lupien, president, Baltimore City Chapter; William Vickers, president, Chicago Council for Exceptional Children; Ethel M. B. Wenger, president, Pennsylvania State Federation; Harley Z Wooden, executive secretary, CEC; Lyndall Zimmerman, president, Illinois Council for Exceptional Children.

The meeting opened with a report on CEC membership status, by June B. Jordan, for 56 cities of the United States and Canada, each of which possesses 200,000 or more population. Her report was interesting in a number of respects. The following is a digest from it.

1. The effect of the 1960 increase in CEC membership dues caused a loss in membership enrollments as follows:

   Loss in the Council as a whole (as of May 31) ..... 5.3 percent
   Chapter loss in 56 largest cities ..... 10.1 percent
   Chapter loss in cities of 500,000 or more ..... 14.6 percent
   Chapter loss in cities of 200,000 to 500,000 ..... 5.2 percent.

2. The above may mean that cities of 200,000 to 500,000 population are large enough to conduct top-level professional programs and, at the same time, small enough to maintain cohesive chapter groups. However, caution must be used in interpreting these percentages, because losses for other populations ranges were not determined.

3. Non-student city chapters with losses of 30 percent or more included: San Francisco, Toronto, Houston No. 2, Buffalo, Memphis, and Rochester. Among the student chapters, Wayne State, Detroit; Buffalo State Teachers College; and Yeshiva University, New York City, experienced the greatest enrollment problems. However, there was no loss in the total CEC student membership for 1960.

4. Large city chapters with sizeable gains included Fort Worth, 46%; Hamilton, Ontario, 27%; Syracuse, 26%; San Antonio, 15%; Worcester, Massachusetts, 15%; Colorado State Chapter (incorporating the city of Denver), 14%; Houston, 14%; and Louisville, 11%.

5. Six of the large cities have no chapter, namely, Boston, New Orleans, Honolulu, Philadelphia, Jersey City, and Edmonton.

6. Student chapters with the largest gains included San Francisco State College, 33%, and Los Angeles State College, 14%.

7. New chapters organized in large cities during 1960 included Fordham University with 23 members and Manitoba Provincial Chapter (including Winnipeg) with 129 members.

After two interesting sessions of discussion, certain conclusions began to emerge. Inasmuch as the group of representatives present constituted no official body, its conclusions and recommendations were not voted upon. However, the following excerpts from the minutes cover a few of the items that seem to have had the most support:

1. That local independent special education associations be made acquainted with the CEC program and its potential benefits to them

2. That CEC establish an experimental membership promotion plan in one, two, or three large cities

3. That large-chapter status be improved

a. By giving it better representation in the government of its federation.
b. By giving it representation on the CEC international membership promotion committee.
c. By giving it opportunity, at least, to audit CEC governing board meetings, but preferably to hold a seat on that board

4. That federation responsibilities be extended by giving them authority and/or encouragement
   a. To approve local-chapter annual reports and constitutions
   b. To recommend chapters eligible for charters
   c. To assume a leadership role in conducting training workshops for local chapters
   d. To conduct membership workshop training programs at their state or provincial conventions
   e. To help develop a more effective system of communication on important matters between themselves and International

5. That CEC headquarters staff prepare, publish, and distribute information concerning promising practices that involve various kinds of chapter and federation activities, including successful membership promotion plans, fund raising, how to obtain bulk-mailing permits, how to obtain tax-exempt status, and so forth.

Many of the above problems and recommendations, plus several not mentioned, have been referred to the CEC headquarters staff to study and determine the best course of action. It is assumed that within the course of this year, a number of proposals can be initiated, if not fully accomplished, that will prove beneficial to all large city chapters.

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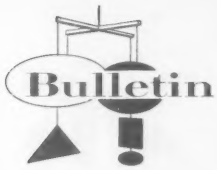
Reactions of the 1960 Delegate Assembly to the Proposed Constituion of The Council for Exceptional Children

by William C. Geer, chairman
Council Committee on Reorganization

The proposed constitution of The Council for Exceptional Children, which has been in preparation two years, had its first reading before the 1960 delegate assembly in Los Angeles and was printed in the May 1960 issue of EXCEPTIONAL CHILDREN. With these preliminary requirements for amending the present CEC constitution accomplished, the stage is set for delegate assembly action on the proposal in 1961, in Detroit. It is important, therefore, that identified issues and raised questions be discussed both among individual members in chapter and federation meetings. The committee on Council reorganization strongly desires that the final resolution of these issues and questions will reflect the wishes of a majority of CEC members. The committee



presents herein the principal reactions of the 1960 delegate assembly in the hope that chapters and federations will discuss the issues that are implied. It will also be very helpful if each delegate sent to the Detroit convention will have been briefed by chapter officers about the wishes of his chapter with regard to the constitution.

1. *Membership*

The principal issue raised by the delegate assembly in the discussion of the proposed constitution, after the first reading, involved the constituency of membership. Article III, Section 1, provides that "new membership enrollment in the Council shall be professional personnel from the field of education of exceptional children and youth." Article III also provides for regular members, student members, and life members. The effect of Article III, as it now stands, would make The Council for Exceptional Children a strictly professional education association. This in turn would mean that many persons formerly eligible to apply for membership in CEC would no longer be eligible to do so. However, present members would not be affected. Unless they were employed by a school board or within the definition of "professional personnel in the field of education of exceptional children and youth," physicians, therapists, psychologists, parents, and others who have formerly held membership in CEC would no longer be eligible. It should be stated here that Article III, as it is now written, is the result of extensive expression from the field. However, there may be sufficient resistance toward restricting the membership of CEC to cause the next delegate assembly to consider amending Article III. It is suggested that chapters discuss membership in CEC with at least three alternatives in mind:

a. Requiring professional educational status in the education of exceptional children for membership in CEC as envisioned in the proposed constitution.
b. Setting up a structure with classes of membership. Several delegates suggested two classes of membership—regular members who are professional educators of exceptional children, and associate members who, though they are not professional educators, have a substantial interest in the education and welfare of exceptional children.
c. Retaining the present membership re-

quirements, which do not restrict the membership, except to require that the person must be "concerned with the education of exceptional children or in a field closely associated therewith."

There are possibly other alternatives which could be considered. The committee on Council reorganization has been faced with no greater problem than that of membership. The committee hopes that as many chapters as possible will give this problem consideration so that their delegates may adequately represent them on the matter in the 1961 assembly.

2. *Matters to be resolved in the by-laws*

Several matters were discussed which will be resolved in the by-laws. One such by-law provision will state the succession of the first vice president to the position of president elect, and then to the presidency of CEC. The obvious effect will be to give the president more experience before he assumes office. Similarly by-laws will state the provision for the election of officers.

The ratio to be used in representation in the delegate assembly will be included in the by-laws except that each chapter, branch, federation or division shall have at least one representative.

With regard to membership, either the by-laws or an appropriate CEC body will need to interpret what is meant by "professional personnel from the field of education of exceptional children and youth."

3. *Other questions*

One delegate inquired concerning the purpose of the trust fund provided for in Article X. This is simply a continuation of the trust fund which is presently provided for and is now in operation. This fund is to help assure the financial stability of The Council for Exceptional Children.

A point of obvious concern was whether local chapters and state and provincial federations would need to revise their own constitutions to be in line with the proposed revised CEC constitution. It is not anticipated that extensive revision of these documents will be needed. However some time may be required to fully realize the implications for such change.

It is extremely important that all CEC members, chapters, and federations give adequate consideration at this time to the proposed revised constitution. The by-laws to implement this constitution are in preparation. Your committee on Council reorganization would be pleased to receive any communication about either. The adequate preparation of 1961's delegates so that they can intelligently act on this constitution is of great importance.

MEMBERSHIPS AND SUBSCRIPTIONS FOR 1960 WERE VERY GOOD

Council membership as of July 31 showed a smaller percentage decrease than is usual for most organizations after a dues increase. A lot of people deserve congratulations for this achievement. The 1960 enrollments on that date were 12,880 or 693 less than the same date last year, thereby amounting to a loss of only 5.1 percent. This percentage may be increased or decreased, slightly, by December 31.

Library subscriptions for the "school year" grew from 1328 to 1575 or 18.6 percent. To date the January to December subscriptions have increased from 804 to 846 or 5.2 percent.

A more adequate report on membership, state by state and province by province, will be made in these pages at a later time. For a report on 1960 membership in large cities, see the news item in this issue entitled, "CEC President Birch Holds Two Meetings to Study Organizational Problems."

COUNCIL TAKES POSITION ON U. S. FEDERAL LEGISLATION

The growing importance and role, in America, of federal legislation to encourage proper education for exceptional children has prompted the Council to establish itself some guide lines for future action. As a result of deliberations by its executive committee, governing board, and delegate assembly, last April, in Los Angeles, it developed a policy statement on such legislation. In brief, the statement proposes that the U. S. federal government:

1. Enact supplementary legislation on the education of exceptional children and provide more substantial appropriations
2. Coordinate the various phases of the federal program involving exceptional children
3. Elevate the status of the government's educational concerns commensurate with the program's importance and the financial support required for its proper operation
4. Encourage recruitment of professional personnel by providing scholarships and fellowships
5. Encourage good training programs through supporting grants and grants-in-aid, made available on the basis of appropriate minimum standards
6. Establish a comprehensive research program in the U. S. Office of Education.

In other words, the Council is committed to support a broad expansion of U. S. Office of Education services in the area of exceptional children. For the complete statement as adopted in Los Angeles, refer to the addenda, item No. 1.

Testimony on SJR 127

One of the Congressional bills in which the Council has been interested is SJR 127 and its companion bills in the House, HJR 488 and 494. Senate hearings were held on 127, April 22, 1960. The Council's representative was Maurice H. Fouracre, head of the department of special education, Teachers College, Columbia University, and a recent past president of CEC.

Dr. Fouracre supported the bill in the Council's behalf by testifying that additional professional personnel are needed in speech and hearing and that SJR 127 was a worthy bill. However, he recommended that certain changes be made

1. To broaden the composition of the bill's advisory committees
2. To channel funds for training and traineeship programs to qualified colleges and universities
3. To administer training funds for speech and hearing personnel through the U. S. Office of Education.

Recommendations "1" and "2" were satisfied in a revision of the bill, but no change was made in the administration of training funds for speech and hearing. The bill, as amended, passed the Senate without a dissenting vote. Whether HJR 488 and 494 will pass the House during August is not known as this copy goes to press.

For Dr. Fouracre's complete testimony, see the addenda item No. 2. For a copy of SJR 127, as revised, write to: Documents Room, U. S. Senate, Washington 25, D. C. For a copy of HJR 494, write to: Documents Room, U. S. House of Representatives, Washington 25, D. C.

HR 12328

A bill to extend and improve the special education and rehabilitation services by the federal government was introduced as HR 12328, on May 23, 1960, by Representative Graham A. Barden, chairman of the House Committee on Education and Labor. This proposed legislation was referred back to Mr. Barden's committee, where it is located at the present writing.

The bill proposes to accomplish its purpose through a newly created unit in the U. S. Department of Health, Education, and Welfare, which would be known as the Agency for Special Education and Rehabilitation. In effect this would place special education and rehabilitation on a par with one another in HEW, by demoting the status of the present federal vocational rehabilitation program and promoting the status of federal special education program. Naturally, such a proposal, at once, stimulated much interest concerning its various

merits and demerits. As a result, Leonard Mayo, director of the Association for the Aid of Crippled Children, called a meeting of the interagency relations committee[1] of which he is chairman, for the purpose of discussing the bill. The committee met in New York City, June 15, with Legislation Chairman Leo E. Connor and Executive Secretary Harley Z Wooden, representing the Council.

Merle E. Frampton, director of the Congressional study on special education and rehabilitation addressed the group and answered questions. The committee will meet again soon to give further consideration to the proposal. In the meantime, the Council has taken no official position, but its executive committee in meeting in Washington, D. C., July 12, made a number of tentative observations.

1. The bill is at variance, in at least one important aspect, with the CEC legislative policy statement. It is the Council's stand that federal services involving the education of exceptional children should remain a function of the U. S. Office of Education. HR 12328 would, if enacted, remove those services from that Office, unless, as one advocate suggested, the Office of Vocational Rehabilitation were made a part of the Office of Education.
2. If hearings are held on the bill, the Council probably should propose that the desirable objectives of HR 12328 be sought through other means than a new special agency. In either event, the Council should work cooperatively with all special education and rehabilitation groups and government agencies in upgrading and strengthening federal services for the education of exceptional children.
3. In the meantime, the Council should obtain further clarification of what HR 12328 would involve if enacted, such as
   a. The identification of all programs that would be transferred or included in the new proposed agency
   b. The delineation of the lines of authority within the new agency
   c. A clarification of the stipends mentioned throughout the bill

[1]The interagency relations committee is composed of representatives of many of the leading professional associations, foundations, and public and private agencies and organizations interested in the education of exceptional children. It provides an opportunity to exchange ideas and to promote unified action. However, the committee, per se, is unable to commit any of its member organizations or agencies to a course of action; it can only recommend what it, in session, considers is the most desirable course.

d. A clarification of various provisions including the functions of 1) the advisory committee and 2) the joint congressional committee.

West Coast Hearings on Federal Legislation

The House subcommittee on special education, under the chairmanship of Representative Carl Elliott, held two hearings this summer on the west coast. Freedom was granted to discuss any existing bills and/or to recommend other needed legislation. CEC was represented at Los Angeles, July 18-19, by Ernest P. Willenberg, chief, bureau of special education, California State Department of Education, and at Portland, Oregon, July 21-22, by Joy Hills Gubser, assistant superintendent, Oregon State Department of Education.

It is expected that the results of these hearings will have helped to determine the fate of bills still pending in the 86th Congress, last month, and the nature of those that will be introduced in the next Congress.

Local Action Needed to Implement National Action

When a Congressman receives 25 or 30 personal letters regarding any particular bill, he begins to take notice. Some CEC members may wonder, though, why the Council needs to call on local people to write such letters. CEC has staff members in its central office who contact members of Congress, as needed, and keeps track of pending legislation. CEC has a legislation committee that studies legislative needs, makes recommendations, and takes such actions as are authorized by the executive committee. CEC's executive committee possesses certain delegated authority for taking action on federal legislation, especially in cases of emergency, and its governing board takes a direct interest in legislative matters, particularly those of a long-range nature. And finally CEC has a delegate assembly that establishes all basic Council policies relating to U. S. federal legislation. Those statements are all true enough, but such an organizational structure is only a beginning. Members of Congress are elected by the people back home—and it's to the people back home that Congress looks on matters of legislation, especially when it is in doubt about the extent of popular demand for a given bill. Council officials and committees can do much, but more often than not the final decision will be determined by the contacts the membership makes.

Legislation Chairman Leo E. Connor needs a two-way communication system between his committee and each state CEC organization—whether it be an overall chapter or federation. Likewise each federation needs a two-way communication system with each of its local chapters. Some state federations already possess such an arrangement. The state federation chairman on legislation with the legislation chairman from local chapter constitute a committee that serves at least three functions.

1. It studies state needs and promotes state legislation
2. It serves as an advisory group to Chairman Connor on matters of U. S. federal legislation
3. It goes into action at the appropriate time on any federal bill on which the Council has taken a position.

What CEC needs now is more states organized in this manner. As a result, Dr. Connor will be contacting each, shortly, soliciting information and help. If your state is all set and ready to assist in assuming responsibility for the kind of legislation designed to govern our field, that is excellent. If you are not yet ready, why not make that task your first order of business this fall?

ADDENDA

No. 1. A Policy Statement Regarding U. S. Federal Legislation on Special Education

I. INTRODUCTION

The Council for Exceptional Children is an association of educators with major concern for those children and youth whose instructional needs differ sufficiently from others to require special services and teachers with specialized qualifications. Included among these children are the gifted, blind, partially seeing, deaf, hard of hearing, crippled, speech impaired, mentally retarded, emotionally disturbed, delinquent, neurologically impaired, and others.

This Council—a 14,000-member department of the National Education Association—consists principally of teachers, school administrators, and teacher educators, complemented by smaller numbers of psychologists, physicians, audiologists, physical therapists, and members of other related professions. These professional workers are to be found wherever a community effort has resulted in a comprehensive program for exceptional children. They serve in state and local school systems, in day programs, residential centers, and in colleges and university settings.

This Council is deeply interested in the forthcoming findings and recommendations of the Congressional Study Committee on Special Education and Rehabilitation. It is, therefore, concerned that the Committee will have obtained all the pertinent facts relating to its purposes and that the Committee's recom-

mendations will be based on the best knowledge and experience available. To provide the scope of Federal services needed, the Council sees broad implications for legislation and appropriations that will strengthen and enhance, on all levels, this Nation's school programs for exceptional children and youth.

II. COORDINATION

So many factors are involved in contributing to good education for exceptional children and youth that coordination of effort on the Federal level is highly essential. Thus, Federal programs designed to provide special materials and equipment for use in behalf of the handicapped; research designed to find ways of preventing, correcting, or compensating for a handicap; grants in aid to promote research in better instructional methods or to provide leadership training programs at the university and college level; and programs established to make pertinent statistical studies or to engage in other related activities need coordination for functional and effective operation.

III. LEVEL OF FEDERAL PROGRAM NEEDED

For many years, the Section on Exceptional Children and Youth of the United States Office of Education operated, most of the time, with a professional staff of one person and with never more than two. In spite of that it tried to provide informational and consultative services for the Nation and to make fact finding and opinion studies. More recently, it developed, with outside cooperation, a study on the competencies needed by administrators, supervisors, and teachers in all areas of exceptionality. In 1958, Congress and the Office began laying plans for limited program expansion. This undertaking, good as it was, has provided the Office with only five specialist positions, with recruitment for two of them presently underway. These specialists, with the help of a small clerical and research staff and one administrator, carry full responsibilities for the Federal program. Such a sized staff remains meager when measured in terms of the highly specialized needs of 10 to 12 percent of the Nation's children. Therefore, it is the urgent recommendation of this Council that the Federal program for the education of exceptional children and youth be given status commensurate with its national importance and the financial support required for its proper operation.

IV. PROFESSIONAL PREPARATION

The quality of educational services for exceptional children and youth resides in the abilities and qualifications of the personnel who provide those services. Therefore, the CEC believes that the Federal Government possesses an unusual challenge and opportunity to upgrade and expand school services for the handicapped and the gifted, through fostering

professional preparation of special educators. We also believe that a single, comprehensive piece of legislation would best accomplish a high-quality, coordinated approach. Such legislation should encompass preparation at each of the three recognized levels of higher education, namely the undergraduate, graduate, and post graduate. We ask that this legislation authorize training of personnel in all areas of exceptionality, including the preparation of classroom and itinerant teachers; consultants, coordinators, supervisors, and administrators; and college instructors and research workers. We further request legislation that will provide scholarships and fellowships to colleges, universities, and state departments of education, with supporting grants for the colleges and universities.

V. GRANTS-IN-AID TO STATES

Grants-in-aid should be furnished to States and public and private non-profit organizations and agencies that hold promise of making a substantial contribution to the education of exceptional children. Such grants should assist in meeting costs of projects for research-demonstration-training- traineeships and special projects, facilities, equipment, and other like expenses.

Additional grants-in-aid programs of matching funds to State departments of education, to encourage and hasten the establishment, improvement, and expansion of education programs for exceptional children, are of vital importance. Such grants would assist in the expansion and improvement of services and support on both the State and local levels.

VI. RESEARCH

Federal legislation should provide the organization and means for a comprehensive research program, in the Office of Education, for the improvement of educational programs for exceptional children. Objectives of such legislation should include (1) the dissemination and interpretation of pertinent research findings conducted by public and private agencies and individuals; (2) the provision of demonstration and research facilities, personnel, equipment, and research grants in all areas concerned; (3) the encouragement of research training; (4) the provision for continued re-evaluation of national research needs; (5) the provision in the Office of Education for advisory and consultative research services; and (6) the provision for liaison

with all relevant research units of the government.

VII. MINIMUM STANDARDS

All grants under this proposed program should be made through the United States Office of Education on the basis of appropriate minimum standards, which the profession of special education, upon request of the Commissioner, will be pleased to outline.

VIII. SERVICES OFFERED

This Council is pleased to offer its professional services freely to the Congress; the Director of the Study Committee on Special Education and Rehabilitation; the Secretary of Health, Education, and Welfare; the Commissioner of Education; and/or others concerned with the advancement of a Federal program for the education of exceptional children and youth.

No. 2. CEC Testimony on SJR 127, April 22, 1960

I am Maurice H. Fouracre, professor of education, head of the department of special education, Teachers College, Columbia University, New York City.

I am representing The Council for Exceptional Children, a department of the National Education Association. The Council has a membership of between 13,000 and 14,000 professional workers, which includes teachers, school administrators and other personnel interested in the care, treatment and education of children who deviate from the normal intellectually, physically and emotionally. These children are those that need special services including modified curricula, teaching methods, materials and therapies which will assist them in being better able to compete with the non-disabled after the completion of their formal education.

I am a past president of The Council for Exceptional Children which is now having its 38th annual convention in Los Angeles, California. I was requested by the president and the executive committee to leave the convention early in order that I might testify on behalf of S. J. Res. 127. I am also representing two divisions of The Council for Exceptional Children: (1) Division on Teacher Education, and (2) Council of Administrators of Special Education in Local School Systems. Further, I have a resolution from the National Association of State Directors of Special Education.

We, the Council, wish to congratulate the Congress on its sincere effort to provide legislation which will increase the number of professional personnel engaged in working with children that are disabled. We are appreciative of having P. L. 85-926 enacted, which provides for the training of leadership personnel in the field of mental retardation. Likewise we feel that S. J. Res. 127 is a worthy bill and concur that additional professional workers are needed in the areas of speech and hearing.

There are certain aspects of S. J. Res. 127 which we would like to have the Senators reconsider before final passage.

We urge that the Bill be expanded to include the training of leadership personnel in the areas of speech and hearing.

We urge objection to the statutory description of the detailed composition of the advisory committees. We believe the members of the advisory committee should be selected on the basis of individual professional competency and at the discretion of the United States Commissioner of Education or his administrative superior.

We urge objection to the channeling of funds for professional education of personnel through service agencies. Monies for training and traineeship programs in the area of education for teachers of the deaf should be granted directly by the U. S. Office of Education to selected, qualified colleges and universities. We believed the pattern for the disbursement of funds has been established under P. L. 85-926.

Under Title II we urge objection to the administration of training funds for speech correctionists and audiologists through the Office of Vocational Rehabilitation. We would urge as an alternative the administration of this program through the U. S. Office of Education. Particularly in the instance of training programs for speech and hearing personnel who are preparing to work in schools we recommend the disbursement of funds through the U. S. Office of Education. To administer such programs through an agency which serves an institutional clientele other than the schools of the Nation is an error of the moment and of precedent. It is presently estimated that 3/5 of the individuals being served in the area of speech and hearing are children of school age. The speech correctionists and many audiologists serving these children are employed by boards of education.

Los Angeles Statistics

Persons in attendance at the Los Angeles convention last April are still commenting on the program, hospitality, facilities, and other features they enjoyed.

The attendance totaled 2065, with the big State of California contributing 1488 of that number. States and provinces with 10 or more in attendance included: Arizona, 12; Colorado, 14; District of

Columbia, 17; Florida, 11; Illinois, 49; Iowa, 27; Kansas, 17; Louisiana, 19; Michigan, 27; Minnesota, 20; Missouri, 34; Nebraska, 10; New Mexico, 12; New York, 32; Ohio, 13; Ontario, 42; Oregon, 16; Pennsylvania, 23; Texas, 29; Utah, 20; Washington, 20; and Wisconsin, 10.

There was only one person from other lands, namely from Australia.

BOY SCOUTS HONOR CEC

During the president's dinner at the annual CEC convention the Boy Scouts of America presented the Council with a certificate of award reading

> *In its golden jubilee year, the Boy Scouts of America gratefully recognizes The Council for Exceptional Children for significant service to American youth through scouting.*

The presentation was made by Superintendent Bruce Miller, Riverside City Schools, California, who is a member of the school service committee of the Scouts. President Ivan K. Garrison accepted in behalf of the Council.

The Boy Scouts also presented Executive Secretary Harley Z Wooden with a somewhat similar personal award at the Council offices in Washington. The Council is most appreciative of these recognitions and of the opportunity it has enjoyed over the years to cooperate with the Boy Scouts in that organization's program for handicapped boys.

CEC REPRESENTED AT IMPORTANT EVENTS

Mary E. Harnett of the Bureau for Children with Retarded Mental Development, New York City Schools, and chairman of the CEC committee on international relations represented the Council, at a meeting of NEA department committee chairmen on international relations.

The meeting was held in Washington, D. C., on May 7. It was devoted to sharing information concerning the international relations programs of the various departments and in determining common interests and possible joint actions.

●

Elsa Schneider, U. S. Office of Education specialist in health, physical education, recreation, and safety, and a member of CEC, was nominated by President Ivan K. Garrison, during his recent term, to serve as an NEA delegate to the annual conference of the World Confederation of Organizations of the Teaching Profession, July 31-August 7, in Amsterdam, The Netherlands.

Miss Schneider, who has been prominently active in WCOTP, is a member of its committee on the physically handicapped, which is under the chairmanship of another CEC member, Lawrence Patterson, director, School for Crippled Children, Montreal, Quebec.

●

Representing this Council at the Captioned Film Conference, June 8-9-10, which was held at the Lexington School for the Deaf in New York City, was Leo Connor, chairman of CEC's legislation committee.

●

The Commission on Teacher Education and Professional Standards, NEA, conducted a conference June 21-25, 1960, on the campus of San Diego State College, on the subject, "The Education of Teachers: Certification." CEC was represented by Francis Ballantine, coordinator in special education, San Diego State College; Rodney Franklin, director of special services, El Cajon Valley Unified School District, El Cajon, California; and Richard Outland, associate professor of special education, San Jose State College, California.

A report of the results of this conference will appear in the October Journal.

●

Elizabeth M. Kelly, a past president of CEC, recently represented the Council before the advanced platform hearings of the Democratic Party, held at the Biltmore Hotel, New York City, on June 21. The subject of the hearings was "Opportunities for Youth."

The invitation was issued the Council by the Young Democrats Division of the Democratic National Committee, who expressed a desire to obtain the feelings and goals of all youth organizations.

President Birch appointed Dr. Kelly, who presented an oral statement based on the Council's statement of policy on federal legislation as adopted by the delegate assembly in Los Angeles.

●

Maynard C. Reynolds, CEC Board Member and professor of educational psychology, College of Education, University of Minnesota, represented the Council at the National Education Association Regional Conference, held in Minneapolis, April 10-13.

COUNCIL RECEIVES PLAQUE IN MEMORY OF ELIZABETH FARRELL

The Council's first president, Elizabeth Farrell, was a dynamic, pioneering personality, with unique ideas. According to *Windows on Henry Street,* by Lillian D. Wald, it was Miss Farrell's belief that every individual should be developed to the highest level of which he was capable—an idea also held by many others of her time. However, Miss Farrell's originality lay in applying this idea to the education of atypical children in the public schools. She arrived at her conclusion as a teacher in the New York City schools—the largest and most complex school system in the country, with its hundreds of thousands of children, its rigid curriculum, and its mass methods of the day. Nevertheless, according to Wald, Miss Farrell was optimistic enough to believe that such a school system could be modified sufficiently to meet the needs of atypical children.

Miss Farrell was convincing in her arguments and, eventually, won official support, wherein she became the first teacher of an "ungraded class" in New York City. She selected her pupils from among the chronic truants, of which there were some 50,000 in the system. The story of her work and of how she involved other disciplines, parents, and regular educators is thrilling testimony to her abilities. Her efforts bore fruit and the work for the atypical grew in the New York Schools to the point that she, in 1906, was appointed inspector of ungraded classes.

In the meantime, Miss Farrell's services came to be in demand at university summer sessions. It was in one of these sessions, namely at Teachers College, Columbia University, in the summer of 1922, that she and a small group of her students[1] organized The International Council for the Education of Exceptional Children, which has since come to be known as The Council for Exceptional Children. She then served for four years as its president and performed many other services contributory to its early growth.

In memory of Miss Farrell's services to atypical children, her sister, Ida E. Farrell of Oswego, New York, has recently presented CEC with a most attractive bronze plaque. It is tentatively located in the Council's office pending the finding of a suitable spot in the NEA building where it can be seen by more people.

The Council is proud of the originality of its early leaders and of the impact their ideas have had in contributing toward appropriate education for all children, including the atypical. It is, particularly, proud of its charter members and of the professional vision and stature of its first president, Elizabeth Farrell. Because of these facts the Council is most grateful to Miss Ida E. Farrell for her generous gift—which will forever remind us of our continuing responsibility to guarantee that children in need of special help will find it in the public schools as well as elsewhere.

Photo by Carl Purcell, NEA

NEA News

FEDERAL SUPPORT FOR EDUCATION

The NEA through resolutions passed by its representative assembly has taken a firm stand in support of a "freedom of choice" education bill that could include the use of federal funds for teachers' salaries and school construction. This broad-purpose type bill would leave control in the hands of state and local governments. The McNamara—Clark bill passed on February 4 reflects these aims. A House bill with the controversial Powell amend-

[1]The persons selected to become charter members of the Council were graduate students, who, themselves, held directorships and supervisory positions in special education.

ment added to it is limited to school construction. Attempts to iron out differences in the two bills have been stalled as the rules committee of the House has refused to pass the bill on to a conference committee.

It is realized as this is written that the short session of Congress in August will see attempts by the NEA to persuade Congress to pass a compromise bill that includes funds for teachers' salaries and lay it on the President's desk before adjournment.

Other Groups

COMMEMORATIVE STAMP ON HIRING HANDICAPPED

A four-cent "Employ the Handicapped" commemorative stamp was placed on sale Aug. 28 to coincide with the 8th World Congress of the ISWC.

Postmaster Gen. Arthur E. Summerfield, speaker at the congress opening session, said that the stamp is being issued in cooperation with the President's Committee on Employment of the Physically Handicapped.

The Post Office Department will maintain a postal station-exhibit in the Waldorf-Astoria to sell the special stamp, and each congress registrant will receive a leaflet containing one of the stamps cancelled. An album containing the stamp will be awarded to a delegate from each foreign country for presentation to his government.

Central design of the stamp was adopted from an actual photograph by Carl Bobertz, New York artist. A total of 120-million have been ordered for distribution.

MILLIGAN HEADS AAMD

Glenn E. Milligan was appointed executive director of the American Association on Mental Deficiency effective March 1. This newly created position which at present is on a part-time basis, will enable Dr. Milligan to concentrate on some of the administrative problems of the Association. One of the first activities will be a revision of the Association Manual, originally prepared by Herschel W. Nisonger.

As a member of the Project staff, Dr. Milligan will continue the development of a legislative study to determine the best procedures for administering institutions for the mentally retarded. He will also be responsible for the development of an original abstracting service in the field of mental retardation.

HANDICAPPED AMERICAN OF YEAR CHOSEN

Dwight D. Guilfoil, Jr., an Illinois manufacturing executive, has been named the "Handicapped American of the Year" for 1959. The trophy is given annually by the President's Committee on Employment of the Physically Handicapped to the person who surmounted a serious handicap and went on to serve other handicapped persons.

The help given other handicapped persons in gaining employment and performance of volunteer community services, despite being in a wheelchair earned the honor for Mr. Guilfoil. He is the 37-year-old president of Paraplegics Manufacturing Co., Inc., and received the award personally from President Eisenhower at the annual meeting of the President's Committee on May 5 in the Departmental Auditorium in Washington, D. C.

Confined to a wheelchair as a result of being stricken with spinal meningitis and polio in 1943 while in the Air Force, Guilfoil has traveled over 75,000 miles in the past two years making addresses on radio and television and at countless meetings. His nomination was made by W. A. Patterson, president of United Airlines, and was one of 62 names submitted from 26 states, considered by the Awards Committee.

HERSCHEL W. NISONGER OF OHIO STATE RETIRES

On June 3, 1960, the friends of Herschel W. Nisonger honored him with a retirement dinner at Ohio State University. Professor Nisonger was for many years director of the Bureau of Educational Research and Service at the university and served his profession in many other capacities.

He was active in CEC, having served as chairman of the finance committee in the 50's. Also, as a past president of the American Hearing Society, a director of the project on technical planning in mental retardation of the American Association on Mental Deficiency, and president-elect of the AAMD.

EXECUTIVES ELECT MC CLURE

William J. McClure, superintendent of the Indiana School for the Deaf and a long-time member of CEC, was recently elected president of the Conference of Executives of American Schools for the Deaf to succeed Marshall S. Hester, superintendent

of the New Mexico School for the Deaf, likewise a Council member for some years.

HARRY J. BAKER OF DETROIT RETIRES

On June 23, 1960, Harry J. Baker, after 40 years association with the psychological clinic of the Detroit Schools was honored at a luncheon by his staff and close friends. Since 1944, Dr. Baker has served as head of the clinic with the title of divisional director.

Dr. Baker is an author of numerous books and articles in the field of exceptional children, psychology, and research. He has also held many important posts in these fields, including the presidency of CEC 1935-37, committee membership for preparation of Part I of the *Forty-Ninth Year Book of the National Society for the Study of Education*, and the chairmanship of the committee on behavioral problems of the White House Conference on Child Health and Protection.

RESEARCH UNITS AT GALLAUDET

Gallaudet College has formalized its expanded research horizons with the establishment of two new organizational units.

The Office of Psycho-Educational Research was established in February to conduct research on the education and psychology of the deaf.

Directed by Stephen P. Quigley, professor of psychology, and director of the National Index on Deafness, Speech, and Hearing, the agency is presently conducting two large-scale projects. One of these projects proposes to construct and standardize a pictorial test of vocational interests for use with the deaf; the other involves comparisons of day students in a number of schools with resident students in the same schools.

The College has also established an Office of Social and Environmental Research directed by Stanley K. Bigman, research associate professor of sociology.

The OSER will assist the U. S. National Health Survey in a nationwide survey of hearing impairment. A world directory on deafness will be published in 1963 as a joint enterprise of the Office and the editorial staff of the *American Annals of the Deaf*. The agency will also undertake a study of the deaf in primative societies.

ONTARIO FEDERATION OF CHAPTERS OF THE COUNCIL FOR EXCEPTIONAL CHILDREN

Annual Conference • Hotel London • London, Ontario
October 27, 28, 29, 1960

CONFERENCE SPEAKER: RAY GRAHAM, DIRECTOR OF SPECIAL EDUCATION FOR THE STATE OF ILLINOIS AND CEC INTERNATIONAL MEMBERSHIP PROMOTION CHAIRMAN

•

Visits to Special Classes, Schools, and Institutions

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Workshops and Panels conducted by specialists in the fields of neurology, psychiatry, psychology, medicine, opthalmology, optometry, and education.

•

CEC MEMBERS FROM THE USA WILL RECEIVE A ROYAL WELCOME!

CHAPTER-FEDERATION DATES

DATE	NAME OF GROUP	MEETING PLACE
Oct.	North Dakota State Chapter	Grand Forks
Oct. 1	Virginia State Fed.	Univ. of Va., Charlottesville
Oct. 6	Maine State Chapter	Portland
Oct. 8	Arkansas State Chapter	AEA Bldg., Little Rock
Oct. 13	West Virginia Fed.	Charleston
Oct. 14-15	Georgia Fed.	Rock Eagle, Eatonton
Oct. 21	Texas Fed.	Corpus Christi
Oct. 27-29	Ontario Fed.	London, Ontario
Oct. 28-29	Illinois Fed.	Conrad Hilton, Chicago
Oct. 28-29	Pennsylvania State Fed.	Bedford Springs Hotel, Bedford
Nov.	North Carolina Fed.	Greensboro
Nov. 4	Missouri State Fed.	Kansas City, Mo.
Nov. 10	New Jersey State Fed.	Ambassador Hotel, Atlantic City
Nov. 12	Maryland State Fed.	Southern Hotel, Baltimore
Feb. '61	Utah State Chapter	Salt Lake City
Mar. 10-11	Washington State Fed.	Pacific Lutheran College, Parkland
May '61	Manitoba Provincial Chapter	
May '61	Indiana Fed.	Indianapolis

WATCH FOR THESE STATE AND PROVINCIAL CEC EVENTS!

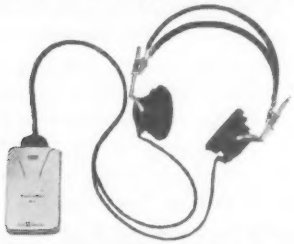
NEW! WARREN "WALK AWAY" – W-1

FREE FIELD AUDITORY TRAINING UNIT

The New Warren W-1 is a marvel of engineering, developed and perfected by audio specialists with years of experience in the auditory training field.

The W-1 offers completely new standards of HIGH POWER OUTPUT with EXTREMELY LOW DISTORTION. PENETRATION, DENSITY and CONFIGURATION OF SPEECH is unparalleled in a wearable auditory training unit. The student using a W-1 naturally developes a high degree of RETENTION.

The Warren W-1 actually contains THREE SEPARATE MODES OF OPERATION — Either of which can be selected at the flip of a switch. In one switch position the student is automatically "tuned in" to the FREE FIELD MAGNETIC LOOP CHANNEL of his particular classroom. A second switch position shifts the W-1 over to a second MAGNETIC LOOP CHANNEL such as might be used in an auditorium, assembly hall or other group meeting place. In the third position, the W-1 operates as an independent unit for personal instruction of the student



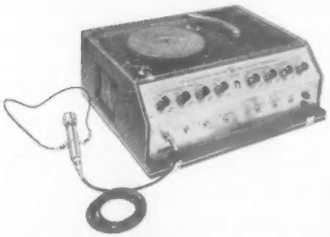
through its regular microphone input channel. Used in this manner, the W-1 provides a natural transition to the student's later use of a regular type hearing aid.

The Warren W-1 uses FIVE TRANSISTORS in a revolutionary new stabilized, low distortion circuit and is easily capable of driving a pair of miniature receivers to their full undistorted output.

A specially designed LINEAR VOLUME CONTROL adjusts the output level smoothly, with NO PEAKS—NO SURGES—and NO INTERNAL NOISE. The W-1 is powered by self-contained, long life MERCURY CELLS of a STANDARD TYPE, easily replaced when exhausted.

Provisions are made for use of either SPECIAL MINIATURE RECEIVERS when the W-1 is used outside the classroom—or WARREN DYNAMIC HEADPHONES when used in the auditory training classroom.

THE NEW WARREN "FREE FIELD" MAGNETIC AUDITORY TRAINING SYSTEM



The engineers who first made AUDITORY TRAINING OF THE DEAF a perfected reality with the development of GATED COMPRESSION AMPLIFICATION, have now expanded that system for use with the new MODEL W-1 WEARABLE AUDITORY TRAINING UNIT.

Now — The student is completely freed of his desk, of interconnecting cables, control boxes, etc. He can literally "WALK AWAY" to any part of the classroom without missing a single syllable of the training program. THE WARREN MODEL W-1 with either miniature receivers or WARREN DYNAMIC HEADPHONES plugged-in, is the only equipment the student needs.

The rest of the system consists of the well known WARREN MODEL T-2 GATED COMPRESSION AMPLIFIER, to which is added a NEW MODEL CL-1 CHANALATOR. This combination feeds a MAGNETIC LOOP in the classroom thus enabling ANY NUMBER OF STUDENTS to receive the training program. Any number of classrooms can be set up with no interference from adjacent classroom channels.

The MODEL W-1 also has switch positions for a common channel such as an auditorium, gymnasium or other group meeting place.

The new WARREN "FREE FIELD" MAGNETIC AUDITORY TRAINING SYSTEM has revolutionized the field because it's many advantages MAKE THE TEACHING JOB EASIER — THE LEARNING FASTER. We will gladly acquaint you with full details on this "YEARS AHEAD" equipment.

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LANGUAGE BARRIER as an educational problem of SPANISH-SPEAKING CHILDREN

WILLIAM R. HOLLAND

Introduction

THE SPANISH-SPEAKING school population of Texas, New Mexico, Colorado, Arizona, and California has been a unique problem to the educational systems of those states for many years. In spite of the discontinuance of classroom segregation in most states, the level of achievement of the Spanish-speaking child is generally somewhat lower than that of English-speaking children. Through the years educators have offered various explanations and solutions to this problem, but few, if any, has succeeded in providing the Spanish-speaking child with as beneficial an educational experience as that received by the "Anglo" student. As a result, many Spanish-speaking youngsters are handicapped in later life because they have not always received maximum benefit from their public school experience.

In the last 40 years many psychological theories and practices have been applied to educational problems. The result has been the development of psychometric tests for school use and the application of learning theory to the problems of teaching. In most cases the psychological approach has had considerable success in dealing with children of English-speaking background. However, when these methods are applied to Spanish-speaking children, the results are usually less accurate, if not entirely incorrect. Evaluations of these youngsters with psychometric methods which are only partially adjusted to their culture can yield only inexact results at best. To date many school systems faced with the educational problems of Spanish-speaking children have not been fully successful because none has a program which deals with the broadest aspects of the problem.

Education has two basic and dynamically interrelated components, the psychological which deals with method, and the cultural which has to do with content. Granting this premise, education can therefore be defined operationally as the learning process by which the individual takes on the culture of his society. The psychological component includes the teacher's methods of instruction in the learning relationship with the student. The cultural component, on the other hand, deals with the content of education, or those facts which are imparted such as "the three R's," etc. The learning process is the area of concentration of the psychologist; while the cultural content of education is the field of operation delegated for study to the anthropologist and sociologist. Therefore, education in every society seeks to impart cultural data by means of psychological techniques. This generalization applies to the public school system of the United States as well as to the Australian Bushman endeavoring to demonstrate the use of the hunting spear to his son. Although the actual processes and content are quite different in each case, the success of the final result, education, depends on the dynamic interaction of the learning processes with the cultural content.

The utilization of cultural information is indispensible for understanding the educational problems of Spanish-speaking children. The initial en-

• WILLIAM R. HOLLAND is a member of the Department of Anthropology, University of Arizona, Tucson. The work in this paper was done when the author was a psychologist in the Tucson Public Schools, and he would like to thank Joe M. Young, director of the Department of Guidance and Counseling of the Tucson Public Schools, for making this study possible. Trained in psychology and anthropology, the author has been working on a special study in Mexico for the past year, and will be in Chiapas, Mexico, for another year.

deavors to provide a cultural framework for this problem usually resulted in diametrically opposed views. On the one extreme educators chose to completely disregard the cultural differences between Spanish-speaking and English-speaking children while others have assumed that Spanish-speaking Americans are culturally undifferentiated from comparable groups in Mexico. However, the facts do not justify either of these views. Actually, there are very few Mexican-Americans who don't retain some remnants of Mexican culture, while those who are exclusive users of Mexican culture are even rarer. The vast majority are culturally very heterogenous and are found in all phases of the acculturation[1] continuum. The Spanish-speaking American is the simultaneous user of both Mexican and American culture in varying quantities. Some are relatively more Mexican than American while the opposite is true of others. The proper approach to the educational problems of Spanish-speaking children lies, therefore, in recognizing their cultural background as a unique combination of both Mexican and American elements, and not as exclusively one or the other.

Problem

The present study attempts to define and analyze the social and cultural background of the educational problems of 36 Spanish-speaking children who were recommended for psychological testing in the Tucson Public School system in the spring of 1958.

Sample

The Wechsler Intelligence Scale for Children (WISC) was administered bilingually to 36 Spanish-speaking children ranging from grades 1C[2] through 5. All were born and have spent practically all of their lives in Tucson or in other parts of southern Arizona. They were recommended by their teachers for psychological testing by the Department of Guidance and Counseling because of academic or emotional problems. These subjects probably constitute a random sample of the Spanish-speaking children tested in the Tucson Public Schools, but they are not thought to be a representative sample of Tucson's Spanish-speaking school population in general.

Testing Procedure

The WISC instructions, questions, and answers were translated into Spanish and mimeographed together with a description of the method of bilingual administration (Holland, 1958).

The purpose of the bilingual testing method is to adjust the WISC more closely to the cultural needs of Spanish-speaking children. It is intended to supplement the conventional procedure but not to alter its basic premises in any way.

Bilingual administration consists of giving the instructions for the various WISC subtests in English first, just as in the standard procedure. Only when the instructions were not understood or were only partially understood in English were they repeated in Spanish.

This method was also used in presenting the questions of the *Information, Comprehension, Arithmetic, Similarities,* and *Vocabulary* subtests. The questions on these subtests were asked first in English, and if not understood in that language, were repeated in Spanish. Correct answers in either language were accepted and given credit.

Two types of responses were scored. Credit was given for an *English R* when the correct answer was given in English to a question stated in that language. Credit was given for a *Bilingual R* when the testing situation had to be supplemented with Spanish. The raw score totals of these subtests were computed separately for the two classes of responses.

No language distinction was made in scoring the *Digit Span* subtest or the *Performance Section,* which were administered by the conventional WISC method.

Interpretive Concepts

This system yields two verbal scores, an *English Verbal IQ* and a *Bilingual Verbal IQ.* The first represents the present level of functioning in English language skills. It indicates most closely the present level of language achievements in the school situation. The second suggests the future

[1] Acculturation is defined as the process by which culture is transmitted through continuous first-hand contact of groups with different cultures. (Winick, 1956)

[2] 1C is a first grade class specially designed to teach English to unacculturated Spanish-speaking children. After a year in 1C normal first grade work is begun.

Table 1. WISC Results for 36 Spanish-Speaking Children Tested Bilingually

Subject	Grade Level	Eng Verb. IQ	Bil. Verb. IQ	Lang. Barr. in IQ Pts.	Perf. IQ	Diff. Perf. IQ & Eng. Verb IQ	Diff. Perf. IQ & Bil. Verb. IQ	Full Scale Bil. IQ
1	1C	52	57	5	50	− 2	− 7	49
2	1C	46	48	2	53	7	5	45
3	1C	63	81	18	103	40	22	91
4	1C	60	67	7	78	18	11	70
5	1C	75	95	20	83	8	−12	88
6	1C	60	67	7	75	15	8	68
7	1	113	115	2	111	− 2	− 4	115
8	1	95	97	2	106	11	9	101
9	1	109	110	1	99	−10	−11	105
10	1	82	96	14	94	12	− 2	95
11	1	74	77	3	90	16	13	82
12	1	57	67	10	85	28	18	73
13	2	69	74	5	78	9	4	73
14	2	80	84	4	115	35	31	99
15	2	72	74	2	72	0	− 2	71
16	2	69	72	3	83	14	11	75
17	2	61	69	8	85	24	16	74
18	2	80	90	10	89	9	− 1	88
19	3	74	80	6	93	19	13	85
20	3	76	79	3	74	− 2	− 5	74
21	3	79	82	3	86	7	4	83
22	3	72	77	5	76	4	− 1	75
23	3	81	82	1	106	25	24	93
24	3	94	95	1	101	7	6	98
25	4	65	70	5	82	17	12	73
26	4	74	77	3	79	5	2	75
27	4	95	95	0	87	− 8	− 8	91
28	4	85	87	2	83	− 2	− 4	84
29	4	89	91	2	79	−10	−12	84
30	4	89	89	0	117	28	28	102
31	5	104	106	2	106	2	0	107
32	5	118	118	0	115	− 3	− 3	118
33	5	97	99	2	99	2	0	99
34	5	110	111	1	122	12	11	118
35	5	92	96	4	122	30	26	109
36	5	94	95	1	94	0	− 1	94
	MEAN	80.6	85.2	4.6	90.8	+10.2	5.6	86.7
	STANDARD DEVIATION	±16.2	±16.7	±4.05	±17.4	±13.6	±13.5	±16.5

potential for verbal skills when the subject's knowledge of English is approximately equal to that of Spanish. The IQ point difference between these scores points up the value of the *Language Barrier*. The formula is:

Language Barrier = *Bilingual Verbal IQ* − *English Verbal IQ*

The *Performance IQ* is believed to represent the approximate intellectual potential under optimal social and cultural conditions. A comparison of the *Performance IQ* with the *Bilingual Verbal IQ* serves to point up how near the subject's present level of functioning in a bilingual environment is to his potential under conditions more favorable to language development.

Results

The WISC results for the 36 subjects are found in Table 1. The range of the *English Verbal IQ* scores was from 45 to 118 points, and the mean for the group was 80.6. The range of the *Bilingual Verbal IQ* scores was from 48 to 118 points, and

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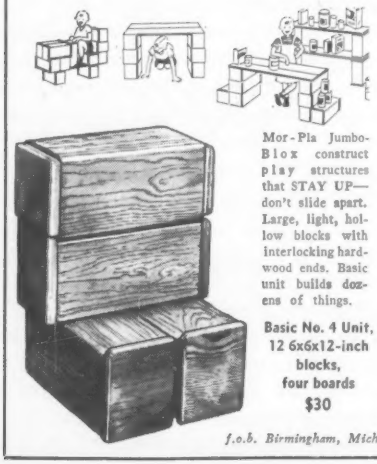

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the mean for the group was 85.2. Therefore, there was an average *Language Barrier* of 4.6 IQ points per student.

Other factors held constant, there is usually a direct relationship between the amount of a student's language barrier and the degree of difficulty he has in classroom achievement. In one case in which the child could barely speak English the language barrier reached 20 points. It was considered very serious in a total of eight cases, serious in seven, and moderate in 18 (Table 2). Only

Table 2. LANGUAGE BARRIER IN IQ POINTS

Points	Students	Language Barrier
0	3	None
1-3	18	Moderate
4-6	7	Serious
7+	8	Very Serious

three cases had no language barrier. The standard deviation of ± 4.05 points indicates that about 68% of the subjects can be expected to have up to nine points of language barrier. The median language barrier of three points suggests that about half or slightly more tend to have only moderate language problems and that this factor is probably not the primary cause of their educational problems. The remaining 15 subjects, or over 40% of the sample, have either serious or very serious language barriers which must be considered as fundamental in their educational difficulties.

Table 3. WISC RESULTS RELATED TO THE GRADE LEVELS OF 36 SPANISH-SPEAKING CHILDREN

Grade	1C	1	2	3	4	5
Number of Students	6	6	6	6	6	6
Mean English Verbal IQ	59	88	72	79	83	103
Mean Bilingual Verbal IQ	69	94	77	83	85	104
Mean Performance IQ	71	98	87	89	88	110
Mean Language Barrier	10	5.3	5.3	3.2	2	1.7
Median Lang. Barrier	7	2.5	4.5	3	2	1.5
(Range)	2-20	1-14	2-10	1-6	0-5	0-4

In Table 3 language barrier is related to grade level. Language difficulties diminish steadily with each successive year of schooling, being greatest among 1C children. This suggests that the intensive efforts to teach English language skills in 1C are only partially successful. Most of the first and second graders tested still had moderately high language barriers, and the average child in all grades studied was impaired so as to be unable to understand completely and benefit fully from the language of the classroom.

In the original WISC standardization on a representative sample of American children, no significant difference was found between the group's verbal and performance results. In the Tucson study, however, the performance results were 10.2 points higher than the *English Verbal IQ* scores for the group on the average. The standard deviation of this difference was 13.6 IQ points, indicating that about 68% of the cases have verbal scores that vary 24 points less to three points greater than the performance results. The difference of the two scores (C.R. $= 4.9$) was significant at the 1% level. Consequently, the generally lower *English Verbal IQ* scores appear to be both the result of lack of acculturation and the typical language problems of children living in a bilingual environment which offers poor chances for language development.

The performance results were on the average 5.6 points higher than the *Bilingual Verbal IQ*. The difference (C.R. $= 2.8$) was significant at the 1% level. This significantly lower verbal level may be the result of learning two languages simultaneously from generally sub-standard speakers of both.

The standard deviation of the difference between the *Bilingual Verbal IQ* and the performance results was ± 13.5. Therefore, in about 68% of the cases the *Bilingual Verbal IQ* varies from 19 points less to eight points greater than the performance score.

Discussion

The language problems of Spanish-speaking children are of two distinct types. The first is referred to in this study as *Language Barrier* and occurs when the subject is unacculturated and simply knows more Spanish than English. At present the Spanish-speaking population of the South-

west is in every stage of acculturation. At one extreme are the monolingual Spanish-speakers who still have very strong cultural ties to Mexico. At the other extreme is a group that is well integrated into American society and whose principal language is now English. This second generation, better established group usually enjoys a significantly higher socio-economic position than does the unacculturated group. However, the majority of the Spanish-speaking Americans of the Southwest occupy the middle range of the acculturation continuum and are truly bi-cultural as well as bilingual. Socially and culturally this group is quite unique because it has no well-defined position in either American or Mexican society. Its members are usually unskilled and semi-skilled laborers and most often occupy the lower socio-economic strata of southwestern society.

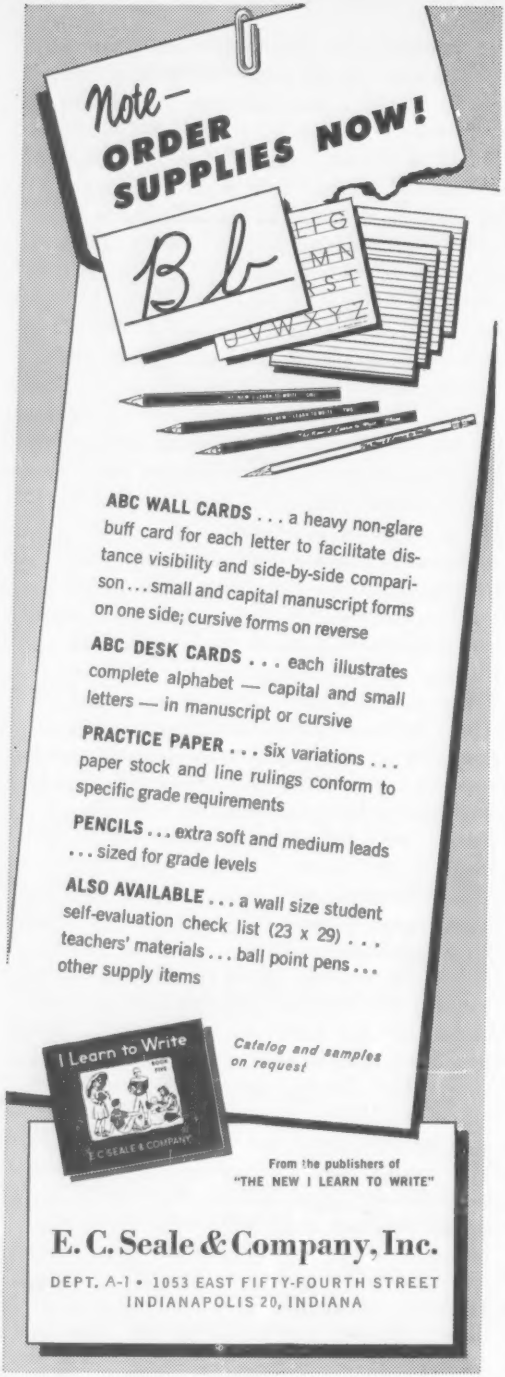
Most Spanish-speaking children are from homes and neighborhoods where English is known but Spanish is the preferred language. These children learn Spanish in the home as their first language, and many begin school at the age of six knowing little or no English. Such youngsters spend their first year in Grade 1C learning English in order to begin regular studies the following year.

Results of this study reveal that over 40% (15 of 36) of the subjects have moderate or serious language barriers (Table 2). The greatest language barriers were found among 1C children (Table 3). This factor decreases steadily with schooling, but it was still present among some fifth graders. The present efforts to acculturate these children in 1C before exposing them to regular instruction are at best only partially successful. While learning English in the primary grades these children generally find it difficult to compete with their "Anglo" peer group because of their inability to fully understand the language of the classroom. By the fifth or sixth year most have learned enough English to enable them to compete with their "Anglo" classmates. However, by this time they are unable to "catch-up," and for many the classroom only becomes increasingly more bewildering. Apathy toward the learning situation is one typical reaction that is at least in part due to this factor. In the later years of schooling this attitude undoubtedly helps to account for the high "drop-out" rate typical of Spanish-speaking high school pupils.

Acculturation proceeds rapidly during the early school years. The old bonds with Mexican culture and the Spanish language are supplemented and in many cases weakened as the new ties with the "Anglo" world are strengthened by the school experience. As a result, most Spanish-speaking children have no definite sense of belonging in either Mexican or American society. They conceive of themselves as neither completely Mexican nor fully American. There is no better example of this cultural blending than the typical speech patterns of these people in which English and Spanish are indiscriminately mixed and capriciously fused. Most members of this group are often heard to lament the fact that although they can speak some of both languages, they can speak neither correctly.

The second type of language problem typical of these children is reflected in the 5.6 IQ point difference (significant at the 1% level) of the *Bilingual Verbal IQ* and the performance scores. The usual explanation of these consistently poorer verbal skills is in terms of the low socio-economic status of the Spanish-speaking population of the Southwest. This line of reasoning explains that due to limited education of the family, large families, and generally unfavorable economic conditions, the average Spanish-speaking family can offer its offspring fewer opportunities to develop proficiency in verbal skills than does the "Anglo" family.

The American Negro child, whose socio-economic status is often comparable to that of the Spanish-speaking youngster, can be used as a basis of comparison for the results of this study. If it is generally true that low socio-economic status leads to the restricted development of the verbal skills, then it is reasonable to expect that such is the case among Negro children also. However, among Negro school children there is no significant difference between verbal and performance IQ scores as a group (Sheuy, 1950). This suggests that low socio-economic status is more often conducive to limited development of both verbal and performance skills and not just verbal skills alone, as is the case with this group of Spanish-speaking children. Therefore, the significantly poorer verbal skills of these youngsters may more logically arise from other factors such as their typical patterns of lan-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guage learning and development in a bilingual environment, and not just as a lack of opportunity, per se.

The first speech patterns of most Spanish-speaking children are formed in the home and neighborhood in Spanish with few secondary contacts with English-speaking people. Consequently, they first develop a small vocabulary of basic Spanish words and concepts directly related to these very restricted in-group experiences. Upon entering school the first year in 1C is devoted to teaching some of these same words and concepts in English as well as some preliminary first grade material. However, the present study shows that this year of initial contact with English language skills is only partially successful in removing the language barrier. Then the following year, with their minimal preparation in English, they begin regular first year work and are confronted with words and concepts in English for which they have no comparable terms in Spanish. The result is that bilingual children can usually speak in their mother language with only a rather limited vocabulary learned in the home and immediate neighborhood. When it becomes necessary for them to utilize a concept that they have learned exclusively in contact with "Anglo" culture, they have no alternative but to introduce English into their conversation. A similar mixing of languages occurs when they speak English and find it necessary to rely on Spanish in order to express themselves more fully. When speaking either language they habitually borrow freely from the other to complete their expressions. Their typical speech patterns are most often a complex mixture of both languages, and seldom exclusively either one or the other. These children then cannot in reality be thought of as fully bilingual, but rather as sub-standard or partial speakers of two languages.

The effects of bilingualism on language development become evident in other aspects of verbal skill also. First, because of the interference of the phonemic systems of the respective languages, they often speak English with a Spanish accent, and vice versa. Moreover, it is very common for them to "Hispanicize" English words and Anglicize Spanish words and these peculiar combinations are typical of their every day speech (Barker, 1958). Lastly, the cultural mixing also becomes evident in their

common mistakes in grammar and sentence structure when speaking either language. These examples of language patterns serve to further point up the cultural uniqueness of the Spanish-speaking population of the Southwest.

The overall result of this bilingual and bi-cultural learning situation that is of importance for educators is that Spanish-speaking children generally have fewer complex language symbols at their command than do their monolingual "Anglo" classmates. Their separate knowledge of both English and Spanish is often considerably below the level of average monolingual children of the same age. Due to their lack of the necessary language symbols, Spanish-speaking children may find it somewhat more difficult to deal in abstract concepts than do comparable monolingual youngsters. Therefore, although their bilingualism has the advantage of allowing them to express themselves in two distinct language groups, it has the disadvantage of interfering with their more thorough learning of either language and the culture from which it originates.

The present discussion only attempts to point out that bilingualism in a low-opportunity group leads to particular patterns of language development that differ from those typical of monolingual children. Educators should become sufficiently aware of these differences so as to be enabled to deal with them. This is not to say, however, that bilingualism should be avoided, per se, as there are many examples of it among greater opportunity groups where the results have proven very favorable.

Where distinct culture groups have come into contact in other parts of the world, the resulting educational problems have sometimes been dealt with by bilingual methods of instruction. In Nigeria, for example, white teachers use both English and the native language in teaching African children (UNESCO, 1953). The National Indian Institute of Mexico (Instituto Nacional Indígenista), on the other hand, deals with the problem of Indian education and incorporation into the life of the nation by preparing natives to be teachers among their people. By both of these methods the classroom can be carried on in either the native or the contact language, as the needs of the students dictate (Aguirre-Beltrán, 1954). Southwestern educators may find the the success of these

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methods suggestive of a solution to their own problem with the Spanish-speaking school population.

Conclusions

To the extent that these 36 cases permit of generalization, these conclusions are indicated about language barrier as an educational problem of Spanish-speaking children:

1. A child has a language barrier when his knowledge of Spanish is greater than his knowledge of English. This condition originates in lack of acculturation.
2. There was an average language barrier of 4.6 IQ points per student. In eight cases the language barrier was very serious, in seven cases it was serious, and in 18 it was moderate. Only three students were completely free of language barrier.
3. Although language barrier declines with increased schooling, it is still present among some fifth graders. Many first, second and third graders still have serious and very serious language barriers.
4. Although grade 1C reduces language barrier considerably, many students beyond this level still have serious language problems.
5. Language barrier is a very important factor in the lower academic achievement of many Spanish-speaking children recommended for testing in the Tucson Public Schools.
6. Aside from language barrier, the substandard verbal development of Spanish-speaking children is probably the result of being bilingual and having to forfeit a more thorough knowledge of one language for partial familiarity with two.

Summary

Thirty-six Spanish-speaking children from grades 10 through 5 were tested bilingually with a special Spanish-English adaptation of the WISC. The purpose was to analyze language barrier as an educational problem of these children. All but three had some language barrier. It was moderate in 18 cases, serious in seven cases, and very serious in eight cases. Lack of English comprehension was a serious handicap to the educational adjustments of over 40% of this group.

Language barrier is greatest among 1C children and decreases steadily with added schooling, but it is still present among fifth grade students in this study.

Language barrier is the result of lack of acculturation. However, the generally low verbal development in both Spanish and English is more likely the consequence of bilingualism in an underprivileged ethnic group.

Bilingual education for bilingual children might prove to be a worthwhile experiment. Teachers who could supplement the language of the classroom with that of the home and neighborhood might achieve more optimal results than are presently realized with all classroom instruction exclusively in English.

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Problems in the education of

Handicapped Children in Sparsely Settled Areas

CHESTER C. TRAVELSTEAD

PARENTS and educators interested in the education of handicapped children have always been faced with difficult problems as they have attempted to help meet the needs of handicapped children. In recent decades much progress has been made in getting public support for appropriate education for children with physical, mental, or emotional handicaps which interfered with learning. More recently, legislation passed at the national, state, and local levels has helped to alleviate many of these problems. Such developments give encouragement to those concerned with this matter. Nevertheless, it is not difficult to see that much remains to be done before the atypical child in the United States will be able to claim his fair share of this country's widely-publicized educational opportunity for all.

The problems facing us are many and varied. In general they have to do with (1) *attitudes* of the public, school administrators, and of the regular classroom teacher, (2) *financial support*, (3) *preparation of competent personnel* for the handicapped, and (4) *development of resources* necessary for these special programs. Such general problems exist in varying degrees on a national scale, and some of them are very acute. For example, when the demand for tax dollars is so critical and when there is, at the same time, an increased emphasis on the education of the gifted—especially in mathematics and science—the education of the handicapped is likely to be forced into the background. Persons seeking support for this less-fortunate group are quite often discouraged, criticized, and even at times ridiculed. These are problems of paramount importance and must be dealt with accordingly. It is not the purpose of this article, however, to discuss them in any detail. Rather it is intended to identify and discuss briefly some of the problems which are unique to sparsely populated areas of the United States and certain problems which are peculiar to one or two particular states in the southwest. It may not be unreasonable to assume that other sparsely settled states have similar problems.

In New Mexico, for example, persons concerned with the education of handicapped children find that at least three general categories of problems face them:

1. Those general problems related to public attitudes, adequate financial support, and teacher recruitment and education
2. Those problems unique to sparsely populated areas of this country
3. Those problems associated with vast cultural differences among the people living in those states. It is about these last two groups that this article will be chiefly concerned.

There seem to be several logical steps to be followed in planning for, and carrying out special educational programs for handicapped children:

1. Locating and accurately identifying handicapped children
2. Recruiting and educating teachers
3. Placing these teachers and keeping them on the job

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4. Financing and carrying on the special educational programs appropriate for the particular group of handicapped children involved

5. Accrediting and continuously improving the colleges offering programs of professional preparation

6. Certifying the teachers of handicapped children.

Now, as we consider the difficulties involved in carrying out these steps in a sparsely populated area and in a state having many and great cultural differences, we may begin to understand and appreciate what states like New Mexico face when they attempt to offer adequate and appropriate educational programs for handicapped children. Let us examine more specifically some of the difficulties encountered.

Locating and Identifying Handicapped Children

The matter of locating, identifying, and making a record of the handicapped children is certainly not a simple one in thickly populated areas composed of somewhat homogeneous groups of people. It is a complex and difficult task, even under the most favorable circumstances, but in sparsely populated states like New Mexico, it becomes an almost impossible task. New Mexico, for example, is the fifth largest state in the Union—almost 125,000 square miles of surface area—with about 950,000 inhabitants, 25% of whom live in the metropolitan area of Albuquerque. A few other widely separated small cities such as Santa Fe, Las Vegas, Las Cruces, Artesia, Hobbs, Clovis, and Carlsbad include approximately another fourth of the total state population, and the remaining ones are scattered over this large area on ranches, or in Indian reservations, and very small villages. There is a serious shortage of professional manpower available to examine and classify disabilities which interfere with school adjustment. But, even if this were available, the money for travel and the vast amount of time required makes other problems pale into insignificance. Furthermore, the language and cultural differences found among the Anglo-Americans, the Indians, the Spanish-Americans, and the Negroes deter even further such efforts. The difficulties in meeting the problem of the Navajo Indian child who is handicapped are apparent in the isolation of clusters of hogans on the reservation, the absence of adequate roads, the language barrier in interviewing parents, and the dissimilar cultural values relating to disability held by the people begin to increase the complexity of the problems in geometric fashion.

Professional Recruitment Problems

Recruiting and educating teachers is a national problem of serious proportion. Obtaining the professional services of competent men and women for the salaries available for such work continues to be one of the great problems facing this country today. The problem is magnified when handicapped children are involved. It is even more discouraging in a state like New Mexico. For, even though the general salary scale throughout the state is high in comparison with most states, few people want to live and teach in the rural and sparsely populated parts of the state. Furthermore, the number of any particular type of handicapped child is so small in a given school district (other than those of the larger communities) that it is not practicable to organize effectively for instruction. One answer for this might be to have itinerant teachers for the handicapped, and this is done. Because of the great distances involved, the problems prove to be staggering. Such conditions negatively affect the recruitment and placement of teachers who may find more satisfying opportunities elsewhere.

Keeping Teachers on the Job

In addition to the points made above, the placement of teachers for handicapped children located outside the few metropolitan areas is most difficult because (1) the few well trained ones prefer to live in the five or six centers of population and are very reluctant to go into rural and mountain areas which are isolated, and (2) the language and cultural differences, more notable as one gets into the remote areas of the state, constitute real obstacles for the teacher raised and educated in the middle class, white, Anglo-American circumstances, and (3) the wide diversity of handicapping conditions found among the relatively few children in any one of these remote school districts makes the task of teaching these children extremely complex.

(Continued on next page)

Financing and Carrying on Special Programs

The State of New Mexico has provided only recently financial support for assignment of specially trained teachers for groups of handicapped children, and even now the provision is quite inadequate. In order to receive state aid for such teachers, at least 15 pupils must be assigned to each such teacher. This is, perhaps, too large a pupil-teacher ratio when the handicaps are the same or similar (such as 15 children with limited vision grouped together; or when 15 orthopedically handicapped are together in a class; or even when a teacher is faced with 15 mentally retarded children), but when one teacher must plan programs for and work with 15 children with many types of exceptionality and the multiply handicapped, the task is not only complex but perhaps impossible.

Transporting the children to central points or keeping more of them in the regular classroom is possible and yet only a partial solution. We may be forced to try imaginative and daring ways to solve some of these problems. Education of handicapped children is more expensive than educating normal children. The question remains for us to decide how we will divide the money available for education. Certainly we cannot educate the able and gifted students at the expense of the normal and handicapped. Neither can we nor should we educate the handicapped at the expense of the normal and gifted pupils. We must somehow find a way to do all three jobs adequately, if we expect to maintain the American tradition of helping *every* child to develop his talents to the maximum so that he may meet all or part of his responsibilities and rights as a productive citizen.

Accreditation of Teacher Training Institutions

The matter of accreditation, especially in the beginning stages of any preparation program, is linked closely with the geographic and economic conditions prevailing in the area to be served by the institutions involved. For example, it is certainly not wise to prepare teachers for handicapped children in New Mexico, as though this teacher were going to teach in New Jersey or New York. In those more populated states it may be expected that the teacher will have a small group of children whose handicaps are quite similar; and, therefore, she can specialize in one particular phase of handicapping condition. But in sparsely settled states like New Mexico she will certainly be faced with entirely different conditions.

All this has serious implications for a teacher training program. Those well versed in the areas of handicapping conditions are well aware of these implications. Instead of the well trained specialist in a certain type of physical or mental handicap, we may have to resort to the generalist, with all the attending disadvantages. Or we may have to depend more and more on the regular classroom teacher for help with the handicapped. We may even come to the conclusion that we must have several boarding school centers in the state to which children are brought for instruction. This would, of course, be quite expensive, and it would bring about other family and home problems not easy to solve. But at the same time, it would offer some advantages. Further consideration must be given to each of these possibilities.

Certification of Teachers

Here again is a matter not unrelated to or unaffected by the unique conditions prevailing in the state. Any rules or regulations for certification would necessarily be formulated in view of these conditions. Little in this respect has yet been done in New Mexico. For the moment, only eight semester hours of work in special education is required of teachers responsible for groups of handicapped children in the schools. This is quite inadequate, but it is a step toward more satisfactory certification. Any further steps taken to improve certification of special teachers must be measured against the character of the program which emerges in terms of the special problems as outlined earlier.

Cultural Problems

Space does not permit further elaboration on the problems relating to and growing out of the cultural differences existing among the people in this state. One can well imagine the difficulties encountered when trying to approach the complex problems of educating the handicapped child in a state like New Mexico. He must bridge the language barriers, the different attitudes and practices growing out of a variety of religions, and span the chasms existing because of widely varying cultural and social backgrounds. A full develop-

ment of this subject would be a lengthy treatise in itself.

A Look Ahead

In spite of the apparently insurmountable problems, we continue to work, therefore, in the face of many difficulties in these sparsely populated areas. We are searching for better answers to our problems. In the meantime we are attempting to locate, identify, and educate our handicapped children, and to educate the teachers for these children.

One heartening note is the probability of regional cooperation in this matter here in the mountain and semi-arid states. The Western Interstate Commission for Higher Education in cooperation with the United Cerebral Palsy Association and the National Society of Crippled Children and Adults has been active in aiding the several states in this area in approaching these problems. Those of us interested in this whole matter hope this cooperation continues. Most of us, in fact, believe it is only through such regional cooperation that these problems will ever be settled.

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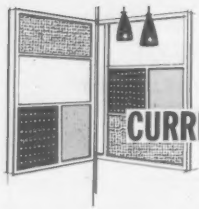

CURRENT PUBLICATIONS

MAGARY, JAMES F., and EICHORN, JOHN R., co-editors. The Exceptional Child: A Book of Readings. New York: Holt, Rinehart and Winston, Inc., 1960... 561 pages. $5.50

Special Education is a very broad field of study encompassing 10 or 12 "types" of exceptionality. Much of the literature is to be found in periodicals other than the dozen or so which deal specifically with the field of special education. Consequently, locating the literature in the field is always a problem of the student. Therefore, all constructive efforts to make the literature available to the profession are decidedly welcome.

The Exceptional Child: A Book of Readings is intended as a supplement for undergraduate survey course. Seventy-one readings which have been selected, in some cases edited, are organized around 11 chapters or sections. In addition to sections on the physically handicapped and retarded there are chapters on each of the following: Social and emotional handicaps, educational retardation, cultural handicaps and gifted.

The selected articles are non-technical and are drawn primarily from general professional literature. Approximately a quarter of them are from so-called special education periodicals. The articles are of recent dates—over half are dated since 1955. According to the authors, the three criteria used in the selection of articles were:

> "(1) competent expression of an important view or trend in the education, rehabilitation, or psychology of exceptional children; (2) contributions to the classroom teacher's understanding of exceptional children; (3) clarity, brevity, and other stylistic considerations. Some articles by outstanding authorities were considered too technical for the undergraduate reader, and were excluded for this reason."

A book of readings is of greatest value as a supplement to instruction if it provides information which extends the information in the basic text. It is the opinion of the reviewer that such readings should usually provide technical or semi-technical information which will give depth of insight to the topic treated usually in a survey fashion in the text. Such readings aid instruction since they provide information which is often difficult to present in lecture form. Perhaps half of the articles reproduced in *Readings* would be classified as semi-technical or enriching-through-depth.

The *Readings* include only eight selections which deal with the areas of communication disorders, i.e., deaf, hard of hearing and speech disorders. This area constitutes the most technical aspects of special education. The problems of teaching and therapy in this area are relatively complex in comparison to such areas as retarding and crippling. It seems reasonable to argue that additional space might be given to this section of *Readings*.

Section nine is devoted to the child who is educationally retarded and includes articles on reading and spelling. Problems in these areas are treated extensively in professional literature. While the particular articles seem well chosen, one might question the wisdom of using space for these problems rather than devoting the pages to problems which are clearly of major concern of special education.

The *Readings* will be welcomed as another helpful teaching resource.—*F. E. Lord, Los Angeles State College*

STRANG, RUTH. Helping Your Gifted Child. New York: E. P. Dutton and Co., 1960, xi plus 270 pages. $4.50

Special educators who recognize that a significant portion of their concern for exceptional children must involve helping parents soundly understand their children and the special provisions appropriate to them will find Dr. Strang's book most appropriate and timely. Thus far, only one other book about the gifted has had sufficient psychological foundation to merit educators' recommending it to parents. Doctor Strang has written her book out of a long and sound developmental and educational psychological background, and reflects a most desirable clinical sensitivity to the general problems of both gifted children and their parents.

Without playing down inappropriately psychometric and psychological evidences of the gamut

of giftedness, she delineates the various kinds of "every day" evidence which parents can seek and utilize in order better to find out if their children are gifted and what their patterns of potentialities may be. She emphasizes equally the value of early ascertainment of superiority in such children and the importance of losing no time in employing, in the home and in the school, practices facilitative to the effective development of these children. She helps parents (and educators) realize that, even though research has long and consistently demonstrated the merits of numerous educational adjustments for the gifted, some exploration among them often is necessary insofar as certain gifted children are concerned.

Problems in which the age of the child plays a large part are dealt with in separate chapters on the preschool child, the school child, and the adolescent. Research findings, general psychological principles, and educational provisions constitute the background in terms of which specifics are discussed. Characteristics of gifted children at these levels, the important problem of parental expectations, nurturant practices, home-school cooperative relationships, and what can be done in the way of guidance are dealt with in a thoroughly positive manner. One chapter is devoted to problems common to all age levels. The provisions of a chapter entitled 'Your Responsibility for the Best Development of All Children,' not only throws the parent's problem with his gifted child into a significant total social perspective, but also provides helpful, though brief, descriptions of various school provisions for the gifted children. At the end of each paper there are questions (either actually collected by Dr. Strang in connection with her talks to parent groups or highly representative of those questions which parents seem always to raise at the end of any talk about gifted children) to which answers—or the essence of answers—are given. In addition to the many specific suggestions of readings found helpful with gifted children which are introduced casually in connection with illustrative situations, three appendixes are provided which can be helpful, both to parents and teachers. One consists of selected books and pamphlets about gifted children. Another gives names, addresses, and some information about children's book clubs. The largest, "Books for the Gifted Child," (prepared by Louise James, district

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EARLY IDENTIFICATION OF EMOTIONALLY HANDICAPPED CHILDREN IN SCHOOL *by* **Eli M. Bower,** *Calif. State Dept. of Education, Sacramento.* Demonstrates in a practical manner how preventive action can be effectively begun in at least one community institution—the public school. Based on six years of research with over 40,000 children. *Publication date Aug. '60* (Amer. Lec. Psychology)

THE TUTORING OF BRAIN-INJURED, MENTALLY RETARDED CHILDREN *by* **James J. Gallagher,** *University of Illinois, Urbana.* Six case studies illustrate the most and least successful cases observed in a three-year research project. *Publication date Oct. '60*

HANDCRAFTS FOR THE HOMEBOUND HANDICAPPED *by* **Mildred Kroll Rich,** *N. Y. C.* Includes thirty illustrated craft projects complete with simple instructions, photographs, and diagrams. Tested for "operational validity." *Publication date Sept. '60*

THE PATHOLOGY OF CEREBRAL PALSY: The Causes and Underlying Nature of the Disorder *by* **Abraham Towbin,** *Community Memorial General Hospital, LaGrange, Illinois.* Brings into focus a correlation between cerebral palsy, mental deficiency, and epilepsy. *Publication date Oct. '60*

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librarian of the Palm Springs, California, Public Schools) provides information as to author, title, publisher, and date on books according to age levels—from picture books for the preschool child to *Doctor Zhivago* for the high school youngster. Included also in this appendix is the list of other suggested book lists for parents.

Although Dr. Strang's book is written primarily for parents of gifted children, educators—teachers, supervisors, administrators alike—could benefit in at least two ways from reading it. On the one hand, their reading what Dr. Strang, out of a long and rich experience with gifted children, has found parents of these children to need, can better prepare such school people to deal constructively with the many problems of home-school relationship which tend to come up or which call for attention. On the other hand, to the extent that educators become familiar with this book, they will be able the more quickly and appropriately to bring it to the attention of the parents of the gifted children.

The temptation at first is to characterize this book as helpful, because it is that. But, to stop at that is to under-represent it. By virtue of the fact that Dr. Strang has gone to greater lengths than is true of the customary "cook book" and gives reasons for, or major conceptualizations underlying, specifics as well as the kinds of things which may be done for gifted children, it must be regarded as valuable instead of merely helpful. Dr. Strang's book is not to parents of gifted children as Dr. Spock's book is to parents of children who have passing physical ailments because of the psychological background which she provides for her very practical suggestions. This reviewer hopes, though,

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that we shall not have to wait too long before we see this book in a paper-back edition that will make possible its wider availability. Dr. Strang's book is one of the two, or at the most, three, oases in this desert teaming with mirages.—*T. Ernest Newland, University of Illinois*

Patterns of Behavior in Children with Auditory Disorders, John Tracy Clinic Research Papers VI. Edgar L. Lowell, principal investigator, financed by Bureau of Crippled Children Service, Dept. of Public Health, State of California, and Children's Bureau, U. S. Dept. of Health, Education, and Welfare. Published by the John Tracy Clinic, Los Angeles, Calif. 46 pages; Jan. 1958.

A major series of research efforts of national importance in the field of the deaf has been assumed by the John Tracy Clinic, Los Angeles, California, within the past few years. Seven research papers under the heading *Studies in Visual Communication* and one concerned with the area of *Audition and Communication of Young Children* have been published under grants from the Office of Vocational Rehabilitation, the Children's Bureau, and the California Department of Public Health. This review is concerned with the last mentioned: *Patterns of Behavior in Children with Auditory Disorders;* principal investigator: Edgar L. Lowell, administrator of the John Tracy Clinic.

Examination of the problem of evaluating and educating children with communication disorders not solely attributed to peripheral hearing loss has been gathering momentum in the past decade. The efforts of William Hardy and his staff at the Johns Hopkins University Hospital, of Helmer Myklebust of Northwestern University, and Mildred McGinnis and Frank Kleffner at the Central Institute for the Deaf—are well known in this respect. Several ongoing studies on various aspects of this topic at St. Joseph's School for the Deaf, New York City and the Bill Wilkerson Speech and Hearing Clinic, Vanderbilt University, will hopefully add even more clues to our growing knowledge of diagnostic and educational techniques.

The John Tracy Clinic study, with its clear-cut research design and procedures and its sensibly limited scope and conclusion, stands as a beacon to all researchers and "experts" of this topic. Dr.

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Lowell indicates the efforts as a "preliminary account . . . on what promises to be a long term and difficult problem."

Various diagnostic, observational and clinical techniques were used to compare the performance and behavior of pre-school children with communication disorders. Observations were obtained in the following areas: audiologic (pure-tone and PGSR audiometry); systematic behavioral observations of the patterns of social participation, communication, and interaction among the children; psychological tests of nonverbal performance; parent interviews; teacher and tutor reports on adjustment and progress; and medical reports and etiology. Two groups of children were compared throughout the study: an experimental group of atypical deaf children chosen on the basis of obvious medical information and staff consensus of admission information and a larger control group of typically deaf children.

The main conclusion indicates that the multidimensional approach used made it possible to differentiate three patterns of behavior characteristics of young children with auditory disorders (typical deaf, "atypical" deaf children, and mixed group). This laid a foundation for the formultion of hypotheses concerning the relationship of communication breakdown and particular types of central and peripheral damage.

The two groups differed in various ways according to the gathered data. The atypical children had more hearing than the typical deaf group as assessed by play-audiometry, but all of the typical deaf group had almost identical audiograms when tested by both PGSR and standard testing. On a nonverbal performance scale, the experimental (atypical) children performed less ably than the members of the control (typical) group, and when judged in a global way they were found to have more severe perceptual difficulties and emotional disturbances. Although developmental histories of most of the children in this study resembled those of a normal hearing population (in terms of age of sitting, walking, and dentition), a higher percentage of the experimental children were delivered by forceps and suffered from high, unexplained fevers often accompanied by convulsions, than the control children. In their play and social behavior, the ex-

perimental children were found to relate less to the nursery staff and to play in a more solitary fashion both at home and in the nursery than the other children in the study.

In terms of communication behavior both the parents and tutors reported that these atypical children paid little attention to the face of a speaking adult as a source of communication. Their expressive behavior was characterized by pre- or non-symbolic vocalization.

A few weaknesses of the study techniques might be noted. Only seven of 24 children achieved stable conditioning in the PGSR study. Despite the detailed description of the play audiometry technique in this study, testers of young children usually admit the unreliability of pure tone subjective procedures and the findings in this aspect would need validation several years later. An unexplained small number of children received full medical examinations and little attempt seems to have been made to use such diagnostic tools as EEG's, other neurological procedures and psychiatric assistance.

The overall impression of the study data and of the testing procedures, however, remains definite

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and helpful. With varied and careful utilization of known audiological, observational, psychological, medical, and parent interview techniques, it is possible to delineate most children with auditory disorders into groups of typical deaf and atypical deaf children.—*Leo E. Connor, Lexington School for the Deaf, N.Y.C.*

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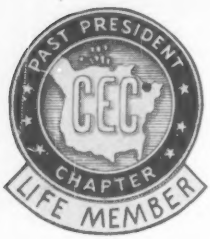

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"Guest Editorial"

JAMES E. RUSSELL

IN THE society in which we live, we can afford to leave no man uneducated. If there is a human potential to develop, it must be developed, or else we can assume that societies with equivalent genetic potential will develop that potential more fully and thus surpass us. And if we posit, as we do, that we are not alone on this planet, that we are in some kind of race, then simple national welfare demands that every potential be developed. This means universal education.

This, I think, is the real argument against the proposals for concentrating educational resources on an elite. We need the elite, but we also need to have everybody educated to his maximum. We need the intermediate people, and we need to utilize every human potential all down the line.

But universal education cannot be uniform education. Education adapted to the whole of a population must of necessity be highly diverse. You cannot act on the assumption that all people are infinitely educable and can be educated the same way. That was the assumption on which the Soviet Union designed the Ten-Year School, and in that assumption the Soviet Union has run right smack into a brick wall. The trouble in the Soviet Union comes from the fact that their ideology tells them that all people are infinitely educable and can be handled in the same way. The facts challenge this ideology; so they are having a little trouble there right now, figuring out how they can back off from an ideological "truth" without making it untrue. They are now in the process of diversifying the educational experiences offered to their people. This is, of course, a necessary thing, but it is hard for them to do.

Good schools for America must combine universal and diversified education. Education must be universal, endlessly proliferated, on the one hand, and endlessly diverse on the other, involving various types of education for various types of individuals. These conditions naturally make for a complicated educational system, one which is very hard to evaluate, and that may lead to some annoyances.

The problem is one of educating each individual child. One little child is a different person from another little child, and the learning he is going to do is his own. Learning is the product of the effort of the learner, and the learner has to learn on the basis of what he already knows. None of these children is identical with any other in this regard. Each must bring to it his own energy, which is released in terms of where he is going and not where someone wants him to go. This means that the essence of the learning process is somehow getting in contact with the child as he is. The minute you fail to take account of the child as he actually is, you lose contact with him. And when you lose contact, you are not teaching him anything worthwhile.

James E. Russell is secretary of the Educational Policies Commission, NEA. This "editorial" is composed of statements taken from "American Education and the National Interest," a lecture presented by Dr. Russell at the National War College, Washington, D. C., September 17, 1959, and published by the National School Boards Association, Evanston, Illinois. Used with permission of the author and the Association.